

FILE NOTATIONS

Entered in NID File
Location Map Pinned
Card Indexed

Checked by Chief
Approval Letter
Disapproval Letter

Sub.
3-9-70 *La Unit*

COMPLETION DATA:

Date Well Completed

Location Inspected

OW..... WW..... TA.....

Bond released

GW..... OS..... PA.....

State or Fee Land

LOGS FILED

Driller's Log.....

Electric Logs (No.) *2*.....

E..... I..... Dual I Lat..... *2* GR-N..... Micro.....

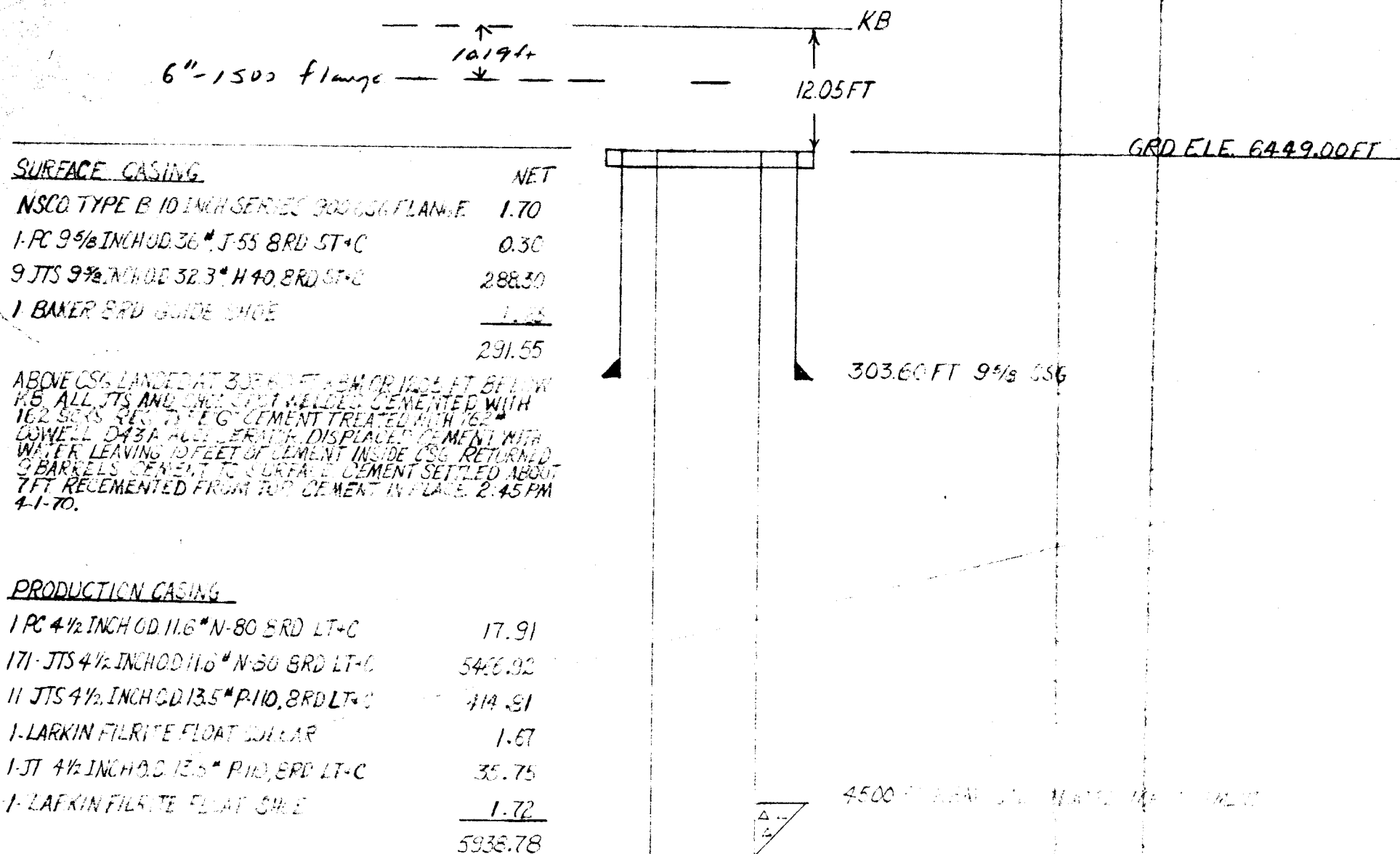
BHC Sonic GR..... Lat..... Mi-L..... Sonic.....

CBLog..... CCLog..... Others.....

CLAY BASIN FIELD
UNIT WELL NO 17
SEC 27 T3N R24E
DAGGETT COUNTY, UTAH

NOT DRAWN TO SCALE

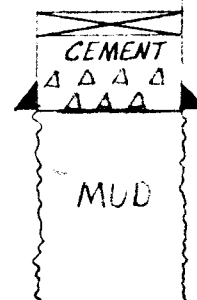
4-21-70 RIR



5938.78

LANDED ABOVE CSG AT 5950.83 FEET KPM OR 12.05 FT BELOW
 10 IN. HOLE 10 INCH SERIES 300 TYPE B CSG FLANGE AND
 FULL INDICATOR HEIGHT OF 38.00" CIRCULATED WITH RIG
 PUMP FOR 30 MINUTES. PREC. DED CEMENT WITH 50% WATER
 MUD FLUSH CEMENTED AT 1.44 LBS 50-50 CEMENT
 CEMENT DISPLACES CEMENT WITH WATER. BUMPED DOWN
 TO 1500 PSIG OR 500 PSIG ABOVE DISPLACEMENT PRESSURE
 1000 PSIG. CSG ROTATED FREELY WHILE CIRC. MIXING
 AND DISPLACING. SEAL OFF GOOD RETURNS THROUGH
 FLOATING EQUIPMENT HELD 2000.0 MT IN PLACE 1.13 PM 4-21-70

INSTALLED ANSIC 3 IN. PRESSURE SEAL WITH 1500 PSIG
 1500 PRESSURE CROSSOVER. 756 SEAL LINES WERE TESTED
 SEAL ASSEMBLY TO 2000 PSIG HELD GOOD



5913.36 FT LARKIN FILRITE FLOAT COLLAR

5950.83 FT 4 1/2" CSG

TD 7 7/8" HOLE 6150 FT

From: P. J. Radman

Rock Springs, Wyoming

To: R. G. Myers

March 3, 1970

Tentative Plan to Drill
Unit Well No. 17 ✓
Clay Basin Field

This well will be drilled to total depth by the _____ Drilling Company using a contract rig. One work order has been originated for the drilling and completion of the well, namely 1070-19237, Drill Unit Well No. 17, Clay Basin Field. The location is C NW NE Sec. 27, T. 3 N., R. 24 E., Daggett County, Utah. The ground elevation is 6449 feet.

1. Drill 12-1/4-inch hole to approximately 310 feet KBM.
2. Run and cement approximately 290 feet of 9-5/8-inch O.D., 32.30-pound, H-40, 8 round thread, ST&C casing. The casing will be cemented by Dowell with 162 sacks of regular Type "G" cement, which represents theoretical requirements plus 100 percent excess cement for 9-5/8-inch O.D. casing in 12-1/4-inch hole with cement returned to surface. Cement will be treated with 762 pounds of Dowell D43A accelerator. Plan on leaving a 10-foot cement plug in the bottom of the casing after displacement is completed. Floating equipment will consist of a Baker guide shoe. The top and bottom of all casing collars will be spot welded in the field and the guide shoe will be spot welded to the shoe joint in the Rock Springs Machine Shop. The bottom of the surface casing should be landed in such a manner that the top of the 10-inch Series 900 casing flange will be at ground level. A cellar four feet deep will be required. Prior to cementing, circulate 50 barrels of mud. Capacity of the 9-5/8-inch O.D., 32.30-pound casing is 23 barrels.
3. After a WOC time of 6 hours, remove the landing joint. Install a NSCo. Type "B" 10-inch Series 900 regular duty casing flange with the 9-5/8-inch O.D., 36-pound, J-55, 8 round thread, ST&C nipple one foot long, which is welded to the casing flange. Install a 2-inch extra heavy nipple, 6-inches

25

3/3/70

-2-

long, and a Nordstrom Figure 824 (800 psi WOG, 1600 psi test) valve on one side outlet of the casing flange and a 2-inch extra heavy bull plug in the opposite side. Install a 10-inch Series 900 double gate hydraulically operated blowout preventer with blind rams in the bottom and 4-1/2-inch rams in the top and finish nipping up. After a WOC time of 12 hours, pressure test surface casing and all preventer rams to 500 psi for 15 minutes, using rig pump and drilling mud. The internal pressure rating for 9-5/8-inch O.D., 32.30-pound, H-40, 8 round thread, ST&C casing is 2070 psi.

4. Drill 7-7/8-inch hole to the total depth of 6100 feet or to such depth as the Geological Department may recommend. A mud de-sander and a de-silter will be used from under the surface casing to total depth to remove all undesirable solids from the mud system and to keep the mud weight to a minimum. The contractor will be responsible for catching 30 foot samples from under surface pipe to 5000 feet KBM. A Company Geologist will be on location to check ten foot cutting samples below 5000 feet. The following mud program is proposed.

Recommended Properties

<u>Footage Interval</u>	<u>Weight (ppg)</u>	<u>Viscosity (Sec./Qt.)</u>	<u>Water Loss (cc API)</u>	<u>Type Mud</u>
Surface hole	Minimum	As required	Optional	Bentonite with water.
Surface cement	--	--	--	Drill with water and discard.
Below surface to total depth	10 *	40-45	8	Gel-chemical system.

* A minimum weight should be maintained with the 10 ppg mud being the maximum weight allowed.

Five drill stem tests are anticipated starting at a depth of approximately 5350 feet. Anticipated tops are as follows:

23

3/3/70

-3-

	<u>Approximate Depth</u> <u>(feet KBM)</u>
Mancos	Surface
Frontier	5350
Mowry	5480
Dakota	5740
Morrison	5870
Total Depth	6100

5. Run Schlumberger dual induction-laterolog from surface casing to total depth and compensated formation density-gamma ray-caliper log from 4000 feet to total depth.
6. Assume commercial quantities of gas and/or oil are present as indicated by open hole drill stem test. Go into hole with 7-7/8-inch bit and drill pipe to total depth to condition mud prior to running production casing. Pull bit laying down drill pipe and drill collars.
7. Run the 4-1/2-inch O.D., 11.6-pound, N-80, 8 round thread, LT&C casing on top and the 4-1/2-inch O.D., 13.5-pound, P-110, 8 round thread, LT&C casing on bottom. Land the casing through the deepest producing zone as indicated by open hole drill stem test or log analysis. A Larkin 4-1/2-inch O.D., 8 round thread, filrite float collar and a Larkin filrite float shoe will be run as floating equipment. Cement casing with 50-50 Pozmix "A" cement. Bring cement top behind the 4-1/2-inch O.D. casing above the uppermost producing zone as indicated by drill stem test and log analysis. Circulate 125 barrels of drilling mud prior to beginning cementing operations. Capacity of the 4-1/2-inch O.D. casing is approximately 95 barrels. Cement requirements will be based on actual hole size as determined by the caliper portion of the formation density log. Rotate casing while circulating, mixing, and displacing cement. Displace cement with water and save all displaced drilling mud.

30

3/3/70

-4-

8. Immediately after cementing operations are completed, land the 4-1/2-inch O.D. casing with full weight of casing on slips in the 10-inch Series 900 casing flange and record indicator weight. Install NSCo. Type "B" 10-inch Series 900 by 6-inch Series 1500 pressure crossover tubing spool. Pressure test primary and secondary seals to 2000 psi for 5 minutes. Minimum collapse pressure for 4-1/2-inch O.D., 11.6-pound, N-80, 8 round thread, LT&C casing is 5950 psi. Install a steel plate on the 6-inch Series 1500 tubing spool flange.
9. Dependent upon the type of completion necessary and weather conditions at the time, it may be desirable to release the drilling rig and move off location.
10. Move in and rig up a completion rig.
11. Install a 6-inch Series 1500 hydraulically operated double gate preventer with blind rams on bottom and 2-1/16-inch tubing rams on top.
12. After a WOC time of at least 50 hours, rig up Dresser Atlas and run bond log and perforating formation control log from plugged back depth to top of cement behind the 4-1/2-inch O.D. casing.
13. After a WOC time of at least 56 hours, pick up and run a 3-3/4-inch bit on 2-1/16-inch O.D., 3.25-pound, J-55, 10 round thread, integral joint tubing to check plugged back depth.
14. Using Halliburton pump truck and water, pressure test casing and tubing rams to 4000 psi for 15 minutes. The minimum internal yield for 4-1/2-inch O.D., 11.6-pound, N-80 casing is 7120 psi and for the 4-1/2-inch O.D., 13.5-pound, P-110 casing is 11,330 psi. The wellhead has a working pressure of 5000 psi with a test pressure of 10,000 psi. Using a 2-1/16-inch, 10 round

W

3/3/70

-5-

- thread, integral joint to 2-3/8-inch O.D., 8 round thread, EUE change nipple, land tubing on the NSCo. Type H-1 tubing hanger tapped for 2-3/8-inch O.D., 8 round thread, EUE tubing and pressure test casing and both sets of blind rams to 4000 psi for 15 minutes. Pull bit, standing tubing in derrick.
15. A tentative plan to complete the well will be issued after results of the above items have been evaluated.

GENERAL INFORMATION

- I. The following tubular goods have been assigned to the well.

<u>Description</u>	<u>Approximate Gross Measurement (feet)</u>	<u>Availability</u>
<u>Surface Casing</u>		
9-5/8-inch O.D., 32.30-pound, H-40, 8 round thread, ST&C casing	261	This casing is presently in Mtn. Fuel yard in Vernal, Utah
1 joint 9-5/8-inch O.D., 32.30-pound, H-40, 8 round thread, ST&C casing	30	Rock Springs Warehouse
1 joint 9-5/8-inch O.D., 36-pound, J-55, 8 round thread, ST&C casing (to be used for landing joint)	<u>30</u>	Rock Springs Warehouse
Total	321	
<u>Production Casing</u>		
<u>(Top to Bottom)</u> 4-1/2-inch O.D., 11.6-pound, N-80, 8 round thread, LT&C casing	5850	To be purchased
4-1/2-inch O.D., 13.5-pound, P-110, 8 round thread, LT&C casing	<u>453</u>	Rock Springs Warehouse
Total	6303	
<u>Production Tubing</u>		
2-1/16-inch O.D., 3.25-pound, J-55, 10 round thread, integral joint tubing	6300	Rock Springs Warehouse

- II. The major objective in this well will be the Frontier formation. Low pressures may be encountered in the Dakota due to depletion by production in Unit Well No. 4. No mud logging unit will be used. Well to be drilled 230 feet into the upper Morrison formation to test for possible stratigraphic variations within.
- 32

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒

DEEPEN ☐

PLUG BACK ☐

b. TYPE OF WELL

OIL WELL ☐

GAS WELL ☒

OTHER

SINGLE ZONE ☐

MULTIPLE ZONE ☐

2. NAME OF OPERATOR

Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR

P. O. Box 1129, Rock Springs, Wyoming 82901.

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

At surface

665' FNL, 1992' FEL S. NW NE

At proposed prod. zone same

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

12 miles east of Dutch John, Utah

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT.

665'

(Also to nearest drlg. unit line, if any)

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.

2700'

Unit #4

16. NO. OF ACRES IN LEASE

640.00

19. PROPOSED DEPTH

6100'

17. NO. OF ACRES ASSIGNED TO THIS WELL

20. ROTARY OR CABLE TOOLS

Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

GR 6449'

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12-1/2	9-5/8	32.3	290	165
7-7/8	4-1/2	11.6	To be determined	

We would like your permission to drill the subject well to an estimated depth of 6100'. Anticipated formations are as follows: Mancos at the surface, Frontier at 5350', Mowry at 5480', Dakota at 5740' and Morrison at 5870'.

Mud will be sufficient to contain formation fluids. A tentative plan to drill the subject well will be sent at a later date. ✓

APPROVED BY DIVISION OF
OIL & GAS CONSERVATION

DATE 3-9-70

BY *cler. B. Feight*

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. SIGNED *B. H. Cullen* TITLE Vice President, Gas Supply Operations DATE March 6, 1970

(This space for Federal or State office use)

PERMIT NO. *2000-5001*

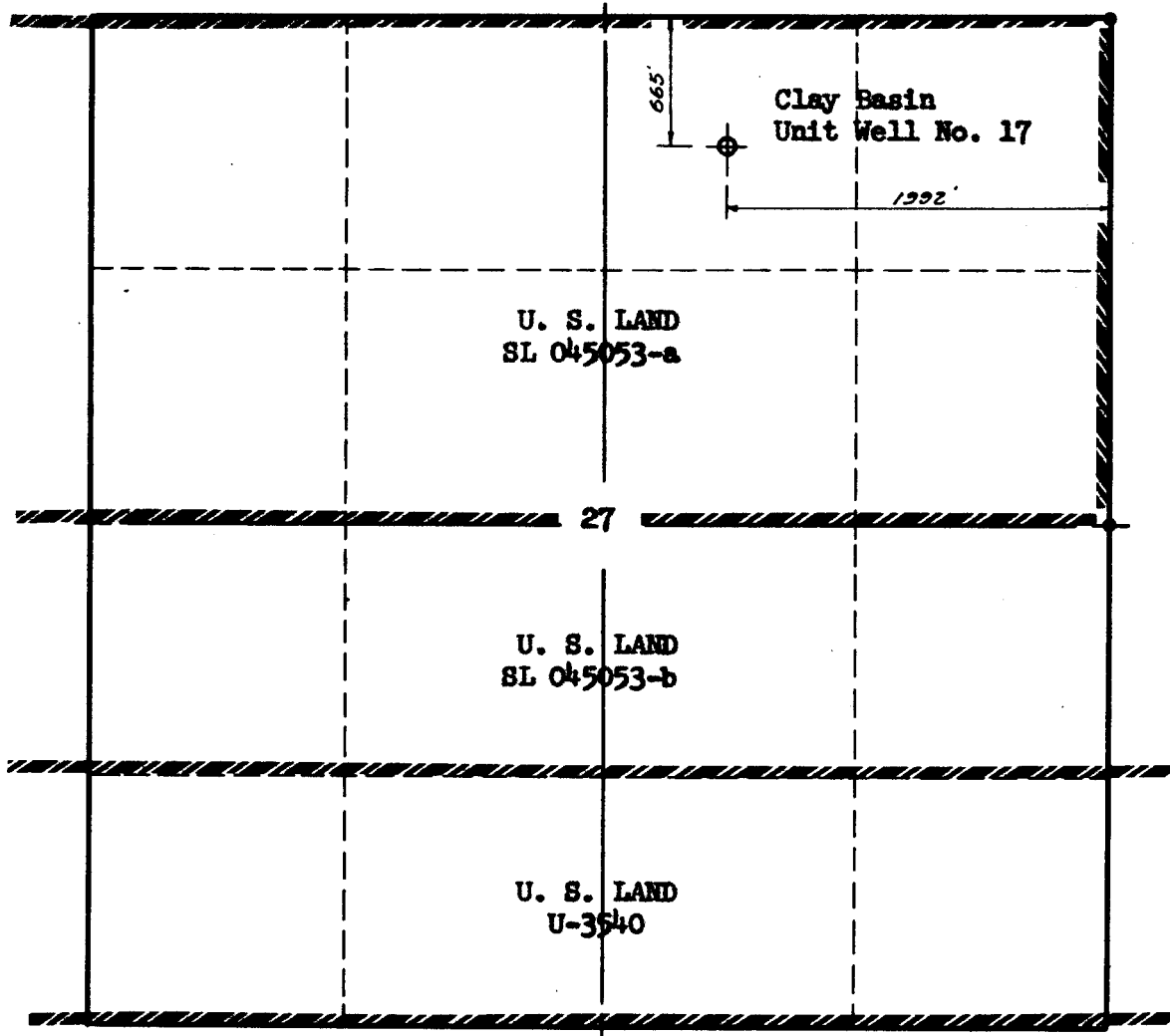
APPROVAL DATE

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:



- ⊕ = Well
 ⊕ = Stone Corner
 ⊕ = Pipe Corner

This is to certify that the above plat was prepared from field notes of actual surveys made under my supervision and that the same are true and correct to the best of my knowledge.

K. A. Loya
Engineer

Utah Registration No. 2708

Elevation by spirit levels.
BM - Clay Basin Unit Well No. 4

ENGINEERING RECORD	
W.O.	1070-19237
Surveyed by	J.B. Carricaburu 2/24/70
Weather	Cloudy, snowstorm
References	G.L.O. Plat
LOCATION DATA	
Field	Clay Basin
Location	NW NE Sec. 27, T. 3N., R. 24E., S. 14M.
County	Daggett
State	Utah
Well Elev.	6449'



MOUNTAIN FUEL
SUPPLY COMPANY
ROCK SPRINGS, WYOMING

Well Location
Clay Basin Unit Well No. 17

DRAWN: 2/25/70 DGH	SCALE: 1 inch = 1000 feet
CHECKED: <i>Rum</i>	DRWG. NO.
APPROVED: KAL	M-9811

PS
JMD

R. G. MYERS

INTEROFFICE COMMUNICATION

FROM R. G. Myers

Rock Springs, Wyoming

CITY

STATE

TO S. J. Fisher

DATE March 13, 1970

SUBJECT Tentative Plan to Drill

Unit Well No. 17

Clay Basin Field

Attached for your information and files is a tentative plan to drill the above-captioned well. This plan was written in accordance with the Geologic Prognosis dated February 10, 1970.

The plan was reviewed March 11, 1970, by Messrs. S. J. Fisher, D. E. Dallas, and R. G. Myers, and any necessary changes have been incorporated in this final plan.

RGM/gm

Attachment

cc: J. T. Simon
B. W. Croft
L. A. Hale (6)
S. J. Fisher
J. E. Adney
Geology (2)
D. E. Dallas (4)
C. F. Rosene
E. J. Widic
U.S.G.S.
State
A. A. Penttila
Paul Zubatch
P. E. Files (3)



27

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

LAND OFFICE _____
LEASE NUMBER _____
UNIT Clay Basin Unit

LESSEE'S MONTHLY REPORT OF OPERATIONS

State Utah County Daggett Field Clay Basin

The following is a correct report of operations and production (including drilling and producing wells) for the month of MAR 1970, 19____.

Agent's address P.O. Box 11368 Company MOUNTAIN FUEL SUPPLY COMPANY

Salt Lake City, Utah 84111

Signed J. Murphy

Phone 328-8315

Agent's title DIVISIONAL CHIEF ACCOUNTANT

SEC. AND 1/4 OF 1/4	TWP.	RANGE	WELL NO.	DAYS PRODUCED	BARRELS OF OIL	GRAVITY	CU. FT. OF GAS (In thousands)	GALLONS OF GASOLINE RECOVERED	BARRELS OF WATER (If none, so state)	REMARKS (If drilling, depth; if shut down, cause; date and result of test for gasoline content of gas)
					S.L.C. 045053A M.F.S. Co.					
NW NE 27	3N	24E	17							Spudded 3-31-70 Drilling 275' 3-31-70

NOTE.—There were _____ runs or sales of oil; _____ M cu. ft. of gas sold;

_____ runs or sales of gasoline during the month. (Write "no" where applicable.)

NOTE.—Report on this form is required for each calendar month, regardless of the status of operations, and must be filed in duplicate with the supervisor by the 6th of the succeeding month, unless otherwise directed by the supervisor.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

LAND OFFICE
LEASE NUMBER
UNIT Clay Basin Unit

LESSEE'S MONTHLY REPORT OF OPERATIONS

State Utah County Daggett Field Clay Basin

The following is a correct report of operations and production (including drilling and producing wells) for the month of 1970, 19.....

Agent's address P.O. Box 11368 Company MOUNTAIN FUEL SUPPLY COMPANY

Salt Lake City, Utah 84111

Signed E. Murphy

Phone 328-8315

Agent's title CHIEF ACCOUNTANT

SEC. AND ¼ OF ¼	TWP.	RANGE	WELL NO.	DAYS PRODUCED	BARRELS OF OIL	GRAVITY	CU. FT. OF GAS (In thousands)	GALLONS OF GASOLINE RECOVERED	BARRELS OF WATER (If none, so state)	REMARKS (If drilling, depth; if shut down, cause; date and result of test for gasoline content of gas)
NW NE 27	3N	24E	17		S.L.C.	045053A	M.F.S. Co.			Spudded 3-31-70 T.D. 6150' Waiting on completion tools 4-30-70

NOTE.—There were runs or sales of oil; M cu. ft. of gas sold;

..... runs or sales of gasoline during the month. (Write "no" where applicable.)

NOTE.—Report on this form is required for each calendar month, regardless of the status of operations, and must be filed in duplicate with the supervisor by the 8th of the succeeding month, unless otherwise directed by the supervisor.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRI
(Other instructions on
reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SL - 045053-a

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1.

OIL ☐ GAS ☒
WELL WELL OTHER

2. NAME OF OPERATOR

Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR

P. O. Box 1129, Rock Springs, Wyoming 82901

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)

At surface

665' FNL, 1992' FEL NW NE

14. PERMIT NO.

-

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

KB 6461.05' GR 6449'

7. UNIT AGREEMENT NAME

Clay Basin Unit

8. FARM OR LEASE NAME

Unit Well

9. WELL NO.

17

10. FIELD AND POOL, OR WILDCAT

Clay Basin

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

NW NE 27-3N-24E., S.L.M.

12. COUNTY OR PARISH

Daggett

13. STATE

Utah

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Supplementary history ☒REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Depth 3305', drilling.

Spudded March 31, 1970.

Landed 291.55' net, 294.36' gross of 9-5/8"OD, 32.3#, J-55 casing at 303.60' and set with 162 sacks of cement.

18. I hereby certify that the foregoing is true and correct

SIGNED

B. H. Craft, Jr.

TITLE

Vice President,
Gas Supply Operations

DATE April 8, 1970

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TR. DATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. SL - 045053-a
2. NAME OF OPERATOR Mountain Fuel Supply Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 1129, Rock Springs, Wyoming 82901		7. UNIT AGREEMENT NAME Clay Basin Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 665' FNL, 1992' FEL NW NE		8. FARM OR LEASE NAME Unit Well
14. PERMIT NO. -		9. WELL NO. 17
15. ELEVATIONS (Show whether DF, RT, GR, etc.) KB 6461.05' GR 6449'		10. FIELD AND POOL, OR WILDCAT Clay Basin
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NW NE 27-3N-24E., S.L.M.
		12. COUNTY OR PARISH Daggett
		13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Supplementary history <input checked="" type="checkbox"/>	
(Other)		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Depth 5519', making DST #2.

DST #1: 5414-5453', Frontier, IO $\frac{1}{2}$ hour, ISI 1 hour, FO 2 hours, FSI 3 hours, opened with strong blow decreasing to weak, no gas, reopened strong, gas in 9 minutes, $\frac{1}{4}$ hour 4 Mcf, $\frac{1}{2}$ hour 5 Mcf, 1 Hour 5 Mcf, 2 hours 4.77 Mcf, recovered 122' drilling mud.

IHP 2689, IOFP's 89-89, ISIP 661, FOFP's 79-100, FSIP 1015, FHP 2627.

18. I hereby certify that the foregoing is true and correct

SIGNED B. H. Craft

TITLE Vice President, Gas Supply Operations

DATE April 14, 1970

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other instruct on reverse side)Form approved.
Budget Bureau No. 12-R1424

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. SL - 045053-a
2. NAME OF OPERATOR Mountain Fuel Supply Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 1129, Rock Springs, Wyoming 82901		7. UNIT AGREEMENT NAME Clay Basin Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 665' FNL, 1992' FEL NW NE		8. FARM OR LEASE NAME Unit Well
14. PERMIT NO. -		9. WELL NO. 17
15. ELEVATIONS (Show whether DF, RT, GR, etc.) KB 6461.05' GR 6449'		10. FIELD AND POOL, OR WILDCAT Clay Basin
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NW NE 27-3N-24E., S.L.M.
		12. COUNTY OR PARISH Daggett
		13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other) Supplementary history	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
PULL OR ALTER CASING	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>		

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Depth 6150', tripping out to log.

DST #2: 5470-5519', Frontier, IO 35 minutes, ISI 1 hour, FO 230 minutes, FSI 4 hours, opened very weak continuing, no gas to surface, reopened strong, gas to surface in 10 minutes, $\frac{1}{2}$ hour 90 Mcf, 1 hour 90 Mcf, 2 hours 106 Mcf, 3 hours 118 Mcf. Recovered 90' mud and 250' gas cut mud. IHP 2601, IOFP's plugged, ISIP 2073, FOFP's 110-112, FSIP 2177, FHP 2422.

DST #3: 5764-5791', Dakota, IO $\frac{1}{2}$ hour, ISI 1 hour, 2nd open 20 minutes, 2nd SI $\frac{1}{2}$ hours, FO 157 minutes, FSI 3 hours, tool opened weak on first two openings, tool plugged, bypassed tool, reopened with strong blow, gas to surface in 11 minutes, $\frac{1}{4}$ hour 215 Mcf, 65 minutes 461 Mcf, 125 minutes 937 Mcf, 142 minutes 937 Mcf, recovered 350' slightly gas cut mud. IHP 2772, FOFP's 171-304, FSIP 551, FHP 2742.

18. I hereby certify that the foregoing is true and correct

SIGNED BW Goff TITLE Vice President, Gas Supply Operations DATE April 20, 1970

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-B1424.

5. LEASE DESIGNATION AND SERIAL NO.

SL - 045053-a

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR
Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR
P. O. Box 1129, Rock Springs, Wyoming 82901

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

665' FNL, 1992' FEL NW NE

7. UNIT AGREEMENT NAME
Clay Basin Unit

8. FARM OR LEASE NAME
Unit Well

9. WELL NO.
17

10. FIELD AND POOL, OR WILDCAT
Clay Basin

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

NW NE 27-3N-24E., S.L.M.

14. PERMIT NO.

-

15. ELEVATIONS (Show whether DF, RT, CR, etc.)

KB 6461.05' GR 6449'

12. COUNTY OR PARISH

Daggett

13. STATE

Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐
☐
☐
☐

PULL OR ALTER CASING

☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐
☐

FRACTURE TREATMENT

REPAIRING WELL

SHOOTING OR ACIDIZING

ALTERING CASING

(Other)

Supplementary history

ABANDONMENT*

☐
☐
☐
☒

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

TD 6150', waiting on completion tools.

Landed 5938.78' net, 5984.97' gross of 4 1/2" OD, 11.6# and 13.5# casing at 5950.83' KBM and set with 440 sacks of cement, casing rotated freely while circulating, mixing and displacing cement, good returns throughout, floating equipment held good.

Rig released April 21, 1970.

18. I hereby certify that the foregoing is true and correct

SIGNED

B. J. Crump

TITLE

Vice President,
Gas Supply Operations

DATE

April 27, 1970

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

PL

INTEROFFICE COMMUNICATION

MYERS

FROM R. G. Myers

Rock Springs, Wyoming
CITY STATE

TO S. J. Fisher

DATE May 8, 1970

SUBJECT Tentative Plan to Complete
Unit Well No. 17
Clay Basin Field

Attached for your information and files is a tentative plan to complete the above-captioned well.

This plan was reviewed May 8, 1970 by Messrs. S. J. Fisher, D. E. Dallas, and R. G. Myers, and any necessary changes have been incorporated in this final plan. This plan was also reviewed by the Exploration Department.

RGM/gm

Attachment

cc: J. T. Simon
B. W. Croft
L. A. Hale (6)
S. J. Fisher
J. E. Adney
Geology (2)
D. E. Dallas (4)
C. F. Rosene
E. J. Widic
U.S.G.S.
State
A. A. Penttila
P. E. Files (3)

10

From: J. J. Sanna

Rock Springs, Wyoming

To: R. G. Myers

May 8, 1970

Tentative Plan to Complete
Unit Well No. 17
Clay Basin Field

Present status of well is as follows:

- a. 9-5/8-inch O.D., 32.3-pound, H-40, 8 round thread, ST&C casing landed at 303.60 feet KBM.
- b. 4-1/2-inch O.D., 11.6 and 13.5-pound, N-80 and P-110, 8 round thread, LT&C casing landed at 5950.83 feet KBM.
- c. The cement behind the 4-1/2-inch O.D. casing was in place 11:15 P.M., April 21, 1970. Calculated cement level at 4500 feet KBM. Estimated plug back at 5913 feet KBM.
- d. The 4-1/2-inch O.D. casing was landed in slips, cut off, and a 10-inch Series 900 by 6-inch Series 1500 pressure crossover tubing spool installed. The primary and secondary seals were pressure tested to 2000 psig. This leaves a 6-inch Series 1500 tubing spool flange looking up.

Zones of interest were tested by open-hole drill stem test as follows:

{ Drill Stem Test No. 1
 Depth 5453 feet, packers 5410 feet and 5414 feet
 Frontier 5407-5447 feet

IO 1 1/2 hour, ISI 1 hour, FO 2 hours, FSI 3 hours (18 minute sample, no sample), opened with strong blow decreasing to weak, no gas, reopened strong, gas in 9 minutes, 1/4 hour 4.12 MCF, 1/2 hour 5.32 MCF, 3/4 hour 5.32 MCF, 1 hour 5.05 MCF, 1-1/4 hours 5.05 MCF, 1-1/2 hours 4.77 MCF, 1-3/4 hours 4.77 MCF, 2 hours 4.77 MCF, recovered 122 feet drilling mud.
IHP 2689, IOFP's 89-89, ISIP 661, FOFP's 79-100, FSIP 1015, FHP 2627 psi.
MFE: 60 pounds, 0.24 cubic feet gas, 600 cc mud, mud resistivity 1.9 @ 72°.

Drill Stem Test No. 2
 Depth 5519 feet, packers 5466 feet and 5470 feet
 Frontier 5467-5514 feet

IO 35 minutes, ISI 1 hour, FO 230 minutes, FSI 4 hours, opened very weak continuing, no gas, reopened strong, gas to surface in 10 minutes, 1/2 hour 90 MCF, 1 hour 90 MCF, 1-1/2 hours 98 MCF, 2 hours 106 MCF, 2-1/2 hours 113 MCF, 3 hours 118 MCF, (shut in at surface to get 100 pound gas sample 50 minutes), recovered 90 feet mud, 250 feet gas cut mud.
IHP 2601, IOFP's plugged, ISIP 2073, FOFP's 110-112, FSIP 2177, FHP 2422 psi.
Tool plugged on initial open, no initial flow pressure.
MFE sample: 0.68 cubic feet gas, 175 cc drilling mud, 115 pounds pressure.

5/8/70

-2-

Drill Stem Test No. 3

Depth 5791 feet, packers 5760 feet and 5764 feet

Dakota sand

IO 1 1/2 hour, ISI 1 hour, 2nd open 20 minutes, 2nd SI 1-1/2 hours, FO 157 minutes, FSI 3 hours, tool opened weak on first two openings, tool plugged, bypassed tool, reopened with strong blow, gas to surface in 11 minutes, 1/4 hour 215 MCF, 35 minutes 398 MCF, 65 minutes 461 MCF, 95 minutes 847 MCF, 125 minutes 937 MCF, 142 minutes 937 MCF, recovered 350 feet slightly gas cut mud. IHP 2772, FOF's 171-304, FSIP 551, FHP 2742.

MFE: 1.85 cubic feet gas, 25 cc water, resistivity 2.8 @ 53°, pit mud 2.4 @ 55°, BHT 132°.

Following is a tentative plan to complete the well in the Frontier sand tested by DST No. 2.

NOTE: The 6-inch Series 1500 tubing spool flange is 10.19 feet below KB.

1. Install a 6-inch Series 1500 hydraulically operated double gate preventer with blind rams on bottom and 2-1/16-inch tubing rams on top.
2. Rig up Dresser Atlas and run bond log and perforating formation control log from plugged back depth to top of cement behind the 4-1/2-inch O.D. casing. Cement fillup behind the casing is calculated at 4500 feet KBM and the plugged back depth is at approximately 5913 feet KBM. Correlate the Dresser Atlas gamma ray log with the Schlumberger dual-induction electrical log run on April 21, 1970 and make any depth adjustments that are necessary.
3. Pick up and run a 3-3/4-inch bit on 2-1/16-inch O.D., 3.25-pound, J-55, 10 round thread, integral joint tubing to check plugged back depth.
4. Using Halliburton pump truck and water, pressure test casing and tubing rams to 4000 psi for 15 minutes. The minimum internal yield for 4-1/2-inch O.D., 11.6-pound, N-80 casing is 7120 psi and for the 4-1/2-inch O.D., 13.5-pound, P-110 casing is 11,330 psi. The wellhead has a working pressure of 5000 psi with a test pressure of 10,000 psi. Using a 2-1/16-inch O.D., 10 round thread, integral joint to 2-3/8-inch O.D., 8 round thread, EUE change nipple, land tubing on the NSCo. Type H-1 tubing hanger tapped for 2-3/8-inch

12

5/8/70

-3-

O.D., 8 round thread, EUE tubing and pressure test casing and blind rams to 4000 psi for 15 minutes.

5. Displace the water out of the casing from plugged back depth to surface using drip oil obtained from Company sources mixed with 0.05-pound Adomite and 0.003 gallon of FR-5 per gallon of drip oil. Approximately 95 barrels will be required. Pull 2-1/16-inch O.D. tubing, standing same in derrick.
6. Install a shop-made well connection flange, 6-inch Series 1500 by 5-1/2-inch O.D., 8 round thread, LT&C box. Rig up Dresser Atlas lubricator and perforate the Frontier formation with 4 holes per foot using 3-1/2-inch Type NCF II jet retrievable carrier gun as follows:

5490 feet to 5514 feet KBM

In all a total of 24 feet will be perforated with 96 holes. The above perforating depths are from the Schlumberger dual induction log and should be correlated with the Dresser Atlas gamma ray log prior to perforating. Locate casing collars as shown on the Dresser Atlas gamma ray log and after perforating operations are completed log the casing perforations and record shut in surface pressure.

7. The maximum recorded shut-in pressure on DST No. 2 was 2117 psi. Drip oil will exert a hydrostatic pressure of 1757 psi at the top of the perforations at 5490 feet KBM. Install 6-inch Series 900 stripper head and run 2-1/16-inch O.D., 3.25-pound, J-55, 10 round thread, integral joint tubing into the well using a shop-made combination Otis Type "G" closing tool with aluminum plug and tubing shoe on the bottom of the tubing string. The closing tool should have a minimum I.D. of 1.50 inches to act as a swab stop. If surface pressure

6

5/8/70

-4-

increases above 50 psig, it may be necessary to unload wellbore of drip oil and allow well to flow to atmosphere while running tubing. Land tubing at a maximum depth of 5470 feet KBM. Remove preventer and install upper portion of wellhead.

8. Rig up two Halliburton HT-400 pump trucks, one 58-C pump truck, and one pressurized blender in order to apply sand-oil treatment to the above perforations down the 2-1/16-inch O.D. tubing and the 2-1/16-inch by 4-1/2-inch annulus simultaneously. Halliburton 2-inch surface lines will be used from the pump trucks to the wellhead. Install a frac-ball injector on one of the Halliburton lines connected to the tubing. A Halliburton pressure recorder will be connected to the wellhead and a fracometer will be used during the sand-oil treatment. A Halliburton fire truck and mechanic will be on location. The annulus between the 9-5/8-inch O.D. casing and the 4-1/2-inch O.D. casing should be open and observed during the entire fracturing operation.
9. Pressure test surface lines and connections from the pump trucks to the wellhead to 7000 psi. Fill the tubing with drip oil (approximately 16 barrels will be required) containing 0.05-pound Adomite and 0.003 gallon FR-5 per gallon of drip oil in order to pump out the aluminum tubing plug. Using all three pump trucks, pump 60 barrels (2520 gallons) of drip oil mixed with 0.05-pound Adomite and 0.003 gallon FR-5 per gallon of drip oil in order to obtain breakdown pressure and injection rate. During this time, observe surface lines and connections for leaks and report breakdown pressure and injection rate to the Rock Springs office.

14

5/8/70

-5-

10. Apply the sand-oil treatment in the following manner:

First Stage

A. Follow the breakdown fluid with 5000 gallons (119 barrels) of drip oil mixed with 0.05-pound Adomite, 0.003 gallon FR-5 per gallon, and Ottawa sand as follows:

First 1000 gallons	- 1/2 pound per gallon	20-40 mesh
Next 1000 gallons	- 3/4 pound per gallon	20-40 mesh
Next 3000 gallons	- 1 pound per gallon	20-40 mesh

Do not exceed a maximum surface pump pressure as measured at the wellhead of 6500 psig. The internal pressure rating for 4-1/2-inch O.D., 11.6-pound, N-80 casing is 7120 psi and the working pressure for the wellhead equipment is 5000 psi with a test pressure of 10,000 psi.

B. Inject 25 7/8-inch O.D. rubber coated nylon ball sealers into the discharge line of one pump truck leading to the tubing.

11. Second Stage - repeat Item No. 10, Part A and B.

12. Third Stage - repeat Item No. 10, Part A only. Displace the drip oil-sand-Adomite-FR-5 mixture with 100 barrels of drip oil mixed with 0.003 gallon FR-5 per gallon of drip oil. This represents the capacity of the casing and tubing to the top of the perforations at 5470 feet KBM plus 18 barrels in order to allow for pumps and discharge lines.

13. Rig up Halliburton wireline equipment and run 7/8-inch diameter weight section on the wireline in order to determine sand fillup in the wellbore.

14. Run short production test through tubing and separator to clean wellbore. Shut well in and record pressure buildup. Release rig.

15

5/8/70

-6-

GENERAL INFORMATION

I. The following material will be used during the sand-oil treatment.

- A. Drip oil - 95 barrels - displace water out of casing
90 barrels - load wellbore after running tubing
16 barrels - load tubing
60 barrels - breakdown fluid
357 barrels - fracturing fluid, three stages of 119 barrels each
100 barrels - displacement
482 barrels - contingency
1200 barrels - total
- B. 12,750 pounds 20-40 mesh Ottawa sand.
- C. 91 gallons FR-5.
- D. 1310 pounds Adomite.
- E. 50 7/8-inch rubber coated nylon ball sealers.

II. Three 400 barrel tanks each with four 4-inch outlets will be used for drip oil storage. The total drip oil to be used during the sand-oil treatment is 1200 barrels.

16

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

LAND OFFICE
LEASE NUMBER
UNIT Clay Basin Unit

LESSEE'S MONTHLY REPORT OF OPERATIONS

State Utah County Daggett Field Clay Basin

The following is a correct report of operations and production (including drilling and producing wells) for the month of _____, 19____,

Agent's address P.O. Box 11368 Company MOUNTAIN FUEL SUPPLY COMPANY

Salt Lake City, Utah 84111 Signed E. Murphy

Phone 328-8315 Agent's title CHIEF ACCOUNTANT

SEC. AND ¼ OF ¼	TWP.	RANGE	WELL No.	DAYS PRODUCED	BARRELS OF OIL	GRAVITY	CU. FT. OF GAS (In thousands)	GALLONS OF GASOLINE RECOVERED	BARRELS OF WATER (If none, so state)	REMARKS (If drilling, depth; if shut down, cause; date and result of test for gasoline content of gas)
					SLC	045053A	M.F.S. Co.			
NW NE 27	3N	24E	17							Spudded 3-31-70 T.D. 6150' FED 5900' Completed 5-20-70 1469 MCF Shut In 4-31-70

NOTE.—There were _____ runs or sales of oil; _____ M cu. ft. of gas sold;

_____ runs or sales of gasoline during the month. (Write "no" where applicable.)

NOTE.—Report on this form is required for each calendar month, regardless of the status of operations, and must be filed in duplicate with the supervisor by the 6th of the succeeding month, unless otherwise directed by the supervisor.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions
verse side)Form approved.
Budget Bureau No. 42-R1424

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. SL - 045053-a
2. NAME OF OPERATOR Mountain Fuel Supply Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 1129, Rock Springs, Wyoming 82901		7. UNIT AGREEMENT NAME Clay Basin Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 665' FNL, 1992' FEL NW NE		8. FARM OR LEASE NAME Unit Well
14. PERMIT NO. -		9. WELL NO. 17
15. ELEVATIONS (Show whether DF, RT, GR, etc.) KB 6461.05' GR 6449'		10. FIELD AND POOL, OR WILDCAT Clay Basin - Frontier
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NW NE 27-3N-24E., S.L.M.
		12. COUNTY OR PARISH Daggett
		13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data.

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Supplementary history</u> <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Rigged up work over rig on May 18, checked plugged back depth at 5900' KBM, perforated from 5494' to 5518' with 4 holes per foot, landed 5444.78' net, 5465.31' gross of 2-1/16" OD, 3.25#, J-55 tubing at 5454.97' KBM, applied sand oil treatment to perforations using 15,000 gallons drip oil treated with 0.05# Adomite and 0.003 gallon's FR-3 per gallon drip oil and 20-40 mesh sand, flow tested and well was making 1469 Mcf of gas per day, FTP 250, CP 525, separator pressure 250 psi, rig released on May 20, 1970

18. I hereby certify that the foregoing is true and correct

SIGNED B. H. Croft Jr.TITLE Vice President, Gas Supply OperationsDATE May 26, 1970

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-E355.5

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DEW <input type="checkbox"/> Other _____		5. LEASE DESIGNATION AND SERIAL NO. SL-045053-a	
b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVL. <input type="checkbox"/> Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME -	
2. NAME OF OPERATOR Mountain Fuel Supply Company		7. UNIT AGREEMENT NAME Clay Basin Unit	
3. ADDRESS OF OPERATOR P. O. Box 1129, Rock Springs, Wyoming 82901		8. FARM OR LEASE NAME Unit Well	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 665' FNL, 1992' FEL NW NE At top prod. interval reported below same At total depth same		9. WELL NO. 17	
14. PERMIT NO. -		10. FIELD AND POOL, OR WILDCAT Clay Basin - Frontier	
DATE ISSUED -		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA NW NE 27-3N-24E., S.L.M.	
15. DATE SPUNDED 3-31-70		12. COUNTY OR PARISH Daggett	
16. DATE T.D. REACHED 4-19-70		13. STATE Utah	
17. DATE COMPL. (Ready to prod.) 5-20-70		19. ELEV. CASINGHEAD -	
18. ELEVATIONS (DF, RKB, RT, GE, ETC.)* KB 6461.05' GR 6449'		20. TOTAL DEPTH, MD & TVD 6150	
21. PLUG, BACK T.D., MD & TVD 5900		22. IF MULTIPLE COMPL., HOW MANY* -	
23. INTERVALS DRILLED BY 0-6150		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5494-5518' - Frontier	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Dual Induction Laterolog, Formation Density-GR	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
CASING SIZE		WEIGHT, LB./FT.	
9-5/8		32.3	
4-1/2		11.6 & 13.5	
DEPTH SET (MD)		303.60	
5950.83		HOLE SIZE	
12-1/4		7-7/8	
CEMENTING RECORD		AMOUNT PULLED	
162		0	
440		0	
29. LINER RECORD		30. TUBING RECORD	
SIZE		TOP (MD)	
BOTTOM (MD)		SACKS CEMENT*	
SCREEN (MD)		SIZE	
2-1/16		DEPTH SET (MD)	
5454.97		PACKER SET (MD)	
31. PERFORATION RECORD (Interval, size and number) 5494-5518', jet, 4 holes per foot		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
5494-5518		15,000 gallons treated drip oil with 20-40 mesh sand 1/2 to 1 ppg	
33. PRODUCTION		DATE FIRST PRODUCTION Shut in	
PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing		WELL STATUS (Producing or shut-in) Shut in	
DATE OF TEST 5-19-70		HOURS TESTED 9	
CHOKE SIZE		PROD'N. FOR TEST PERIOD 1469	
OIL—BBL.		GAS—MCF.	
WATER—BBL.		OIL GRAVITY-API (CORR.)	
250		525	
CALCULATED 24-HOUR RATE 1469		OIL—BBL.	
GAS—MCF.		WATER—BBL.	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented while testing		TEST WITNESSED BY	
35. LIST OF ATTACHMENTS Dual Induction Laterolog, Formation Density, WellLithology (Will be sent at a later date).		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	
SIGNED B. H. Croft Jr		Vice President, Gas Supply Operations	
TITLE		DATE May 27, 1970	

*(See Instructions and Spaces for Additional Data on Reverse Side)



MOUNTAIN FUEL SUPPLY COMPANY
TRANSMISSION AND PRODUCTION
MEASUREMENT EQUIPMENT INSPECTION REPORT

ROCK SPRINGS, WYOMING

3N24E27

LOCATION: **CLAY BASIN m.s. # 7** COUNTY **DAGGETT** STATE **UTAH** DATE **10-22-82**

STATION OR CUSTOMER **CLAY BASIN # 17** TIME OF TEST **AM 3:30**

ORIFICE METER **ROBORO** MAKE **J62336** SERIAL NO. **28** TYPE **89N074L** CHART NO. **D.S.** STATIC CON. **ADJ** PEN ARC **31** CLOCK ROT. **DAY**

METER RANGE **100** INCHES **1000** POUNDS **11.6** ATMOS. PRESS. ☒ IS ATMOS SET ON CHART? ☐ No ☒ Sq. Root ☐ Linear

METER READING DEAD WEIGHT CHECK STATIC FOUND STATIC LEFT

D. W. Press. **218** Diff. Found **Ø** Diff. Left **Ø** Temp. Found **—** Temp. Left **—** Time Lag **6 hrs**

Atmos. Press. **11.6** Static Pen Set **229.6** **4.79** **4.79**

DIFFERENTIAL TEST

STATIC TEST

AS FOUND

AS LEFT

AS FOUND

AS LEFT

SQ. RT. VALUE, AS LEFT

UP		DOWN		UP		DOWN	
Man.	Meter	Man.	Meter	Man.	Meter	Man.	Meter
0	0	80	80	0		80	
10	10	60	60	10		60	
30	30	40	40	30	SAME	40	
50	50	20	20	50		20	
70	70	0	0	70		0	
90	90			90			

D. W. Meter	U. W. Meter

$$\sqrt{\frac{\text{Psia} \times 100}{R_p}} = \sqrt{\frac{229.6 \times 100}{1000}} = 4.79$$

THERMOMETER

MAKE — **NONE**

RANGE

SERIAL NO.

AS FOUND

AS LEFT

UP

DOWN

UP

DOWN

Test Therm

Rec. Therm

Test Therm

Rec. Therm

Test Therm

Rec. Therm

Test Therm

Rec. Therm

ORIFICE PLATE

ORIFICE FITTING OR UNION

Size **2" x 1.500"**Make — **DANIEL**Type — **Simplex**

Edges Sharp?

Orifice Condition

Serial No. **ASA**

Line Size

I.D.

Damaged?

Dirty?

600**2.067**

Micro Horizontal

Micro Vertical

Meter Tube

Upstream ID
Downstream ID

TELEMETERING

GRAVITY:

ATMOS. TEMP

DIFFERENTIAL

PRESSURE

REMARKS:

FOUND

LEFT

FOUND

LEFT

UP		DOWN		UP		DOWN		UP		DOWN		UP		DOWN	
TEST	TRANS	TEST	TRANS	TEST	TRANS	TEST	TRANS	TEST	TRANS	TEST	TRANS	TEST	TRANS	TEST	TRANS
0%		100%		0%		100%		0%		100%		0%		100%	
25%		75%		25%		75%		25%		75%		25%		75%	
50%		50%		50%		50%		50%		50%		50%		50%	
75%		25%		75%		25%		75%		25%		75%		25%	
100%		0%		100%		0%		100%		0%		100%		0%	

ADJ. DIFF PEN ARCM.F.S. CO. TESTER: **Doug Walters**

WITNESS:

PLACE LEFT INSIDE EDGE OF ORIFICE PLATE ON ARROW AND MARK BOTH INSIDE EDGES ON SCALE

STATE OF UTAH
DIVISION OF OIL, GAS AND MINING
 1594 West North Temple, Suite 1210, PO Box 145801, Salt Lake City, UT 84114-5801

Page 2 of 5

MONTHLY OIL AND GAS PRODUCTION REPORT

OPERATOR NAME AND ADDRESS:

JOHN JOOSTEN
 WEXPRO COMPANY
 PO BOX 11070
 SALT LAKE CITY UT 84147

UTAH ACCOUNT NUMBER: N1070REPORT PERIOD (MONTH/YEAR): 9 / 96AMENDED REPORT ☐ (Highlight Changes)

Well Name			Producing Zone	Well Status	Days Oper	Production Volumes		
API Number	Entity	Location				OIL(BBL)	GAS(MCF)	WATER(BBL)
✓ CLAY BASIN UNIT 14								
4300915638	01025	03N 24E 20	FRTR					
✓ CLAY BASIN UNIT 15								
4300915639	01025	03N 24E 23	FRTR					
✓ CLAY BASIN UNIT #16								
4300930003	01025	03N 24E 25	FRTR					
✓ CLAY BASIN UNIT #17								
4300930004	01025	03N 24E 27	FRTR					
✓ CLAY BASIN UNIT #18								
4300930006	01025	03N 24E 23	FRTR					
✓ CLAY BASIN UNIT #20								
4300930007	01025	03N 24E 22	FRTR					
✓ CLAY BASIN UNIT #19								
4300930008	01025	03N 24E 17	FRTR					
✓ CLAY BASIN UNIT #23								
4300930009	01025	03N 24E 26	FRTR					
✓ CLAY BASIN UNIT #22								
4300930010	01025	03N 24E 16	FRTR			ML-807		
✓ CLAY BASIN UNIT #61								
4300930060	01025	03N 24E 20	FRTR					
✓ CLAY BASIN UNIT #62								
4300930061	01025	03N 24E 21	FRTR					
CARTER-LEVERTON STATE 1								
4303710529	01031	33S 26E 32	ISMY					
PIUTE KNOLL #1								
4303730097	01032	33S 25E 26	ISMY					
TOTALS								

COMMENTS: _____

I hereby certify that this report is true and complete to the best of my knowledge.

Date: _____

Name and Signature: _____

Telephone Number: _____

OPERATOR CHANGE WORKSHEET

Attach all documentation received by the division regarding this change.
Initial each listed item when completed. Write N/A if item is not applicable.

1-LEC	6-DEC
2-GLH	7-KDR
3-DTS	8-SJ
4-VLD	9-FILE
5-RJF	

- ☒ Change of Operator (well sold) ☐ Designation of Agent
☐ Designation of Operator ☐ Operator Name Change Only

The operator of the well(s) listed below has changed, effective: 4-26-84

TO: (new operator) WEXPRO COMPANY
 (address) PO BOX 11070
SALT LAKE CITY UT 84147
 Phone: (801) 530-2586
 Account no. N1070

FROM: (old operator) MOUNTAIN FUEL SUPPLY CO
 (address) 180 E 100 S
SALT LAKE CITY UT 84139
 Phone: (801) 534-5267
 Account no. N0680

WELL(S) attach additional page if needed:

*CLAY BASIN UNIT

Name: **SEE ATTACHED**	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____
Name: _____	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____
Name: _____	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____
Name: _____	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____
Name: _____	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____
Name: _____	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____
Name: _____	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____

OPERATOR CHANGE DOCUMENTATION

- N/A 1. (r649-8-10) Sundry or other legal documentation has been received from the **FORMER** operator (attach to this form). ** See Comments.*
- N/A 2. (r649-8-10) Sundry or other legal documentation has been received from the **NEW** operator (Attach to this form). ** See Comments.*
- N/A 3. The Department of Commerce has been contacted if the new operator above is not currently operating any wells in Utah. Is the company registered with the state? (yes/no) _____. If yes, show company file number: _____.
- Lic 4. **FOR INDIAN AND FEDERAL WELLS ONLY.** The BLM has been contacted regarding this change. Make note of BLM status in comments section of this form. BLM approval of Federal and Indian well operator changes should ordinarily take place prior to the division's approval, and before the completion of steps 5 through 9 below.
- N/A 5. Changes have been entered in the Oil and Gas Information System (3270) for each well listed above. ** See Comments.*
- N/A 6. Cardex file has been updated for each well listed above. ** See Comments.*
- Lic 7. Well file labels have been updated for each well listed above. (11-6-96)
- N/A 8. Changes have been included on the monthly "Operator, Address, and Account Changes" memo for distribution to Trust Lands, Sovereign Lands, UGS, Tax Commission, etc. ** See Comments.*
- Lic 9. A folder has been set up for the Operator Change file, and a copy of this page has been placed there for reference during routing and processing of the original documents.



United States Department of the Interior

IN REPLY REFER TO

BUREAU OF LAND MANAGEMENT
UTAH STATE OFFICE
136 E. SOUTH TEMPLE
SALT LAKE CITY, UTAH 84111

April 26, 1984

WEXPRO Company
P.O. Box 11368
Salt Lake City, Utah 84139

Re: Successor Unit Operator
Clay Basin Unit
Daggett County, Utah and
Sweetwater County, Wyoming

Gentlemen:

On April 26, 1984, we received an indenture dated April 10, 1984, whereby Mountain Fuel Supply Company resigned as Unit Operator and WEXPRO Company is accepted as Successor of Unit Operator for the Clay Basin Unit Agreement, Daggett County, Utah and Sweetwater County, Wyoming.

The indenture was executed by both parties. The signatory parties have complied with Section 6 of the unit agreement. The instrument is hereby accepted effective as of April 26, 1984. Please advise all interested parties of the change in unit operator.

Sincerely,

E. W. Guynn
Chief, Branch of Fluid Minerals

Enclosure

RECEIVED
APR 30 1984

WEXPRO COMPANY
LANDS & LEASING



MOUNTAIN FUEL SUPPLY COMPANY

180 EAST FIRST SOUTH • P. O. BOX 11368 • SALT LAKE CITY, UTAH 84139 • PHONE (801) 534-5555

April 10, 1984

Working Interest Owners
Clay Basin Unit
Daggett County, Utah and
Sweetwater County, Wyoming


Gentlemen:

Mountain Fuel Supply Company, as designated operator of the Clay Basin Unit, hereby resigns as Unit Operator under the provisions of Section 4 of the Unit Agreement subject to: WEXPRO Company being designated successor Unit Operator by the committed working interest owners and approval by the Bureau of Land Management.

WEXPRO Company, a wholly owned second tier subsidiary company of Mountain Fuel Supply Company, has assumed all of the development and producing operations of Mountain Fuel. Office and operating personnel have been transferred to WEXPRO so there will be no physical change in operations.

MOUNTAIN FUEL SUPPLY COMPANY

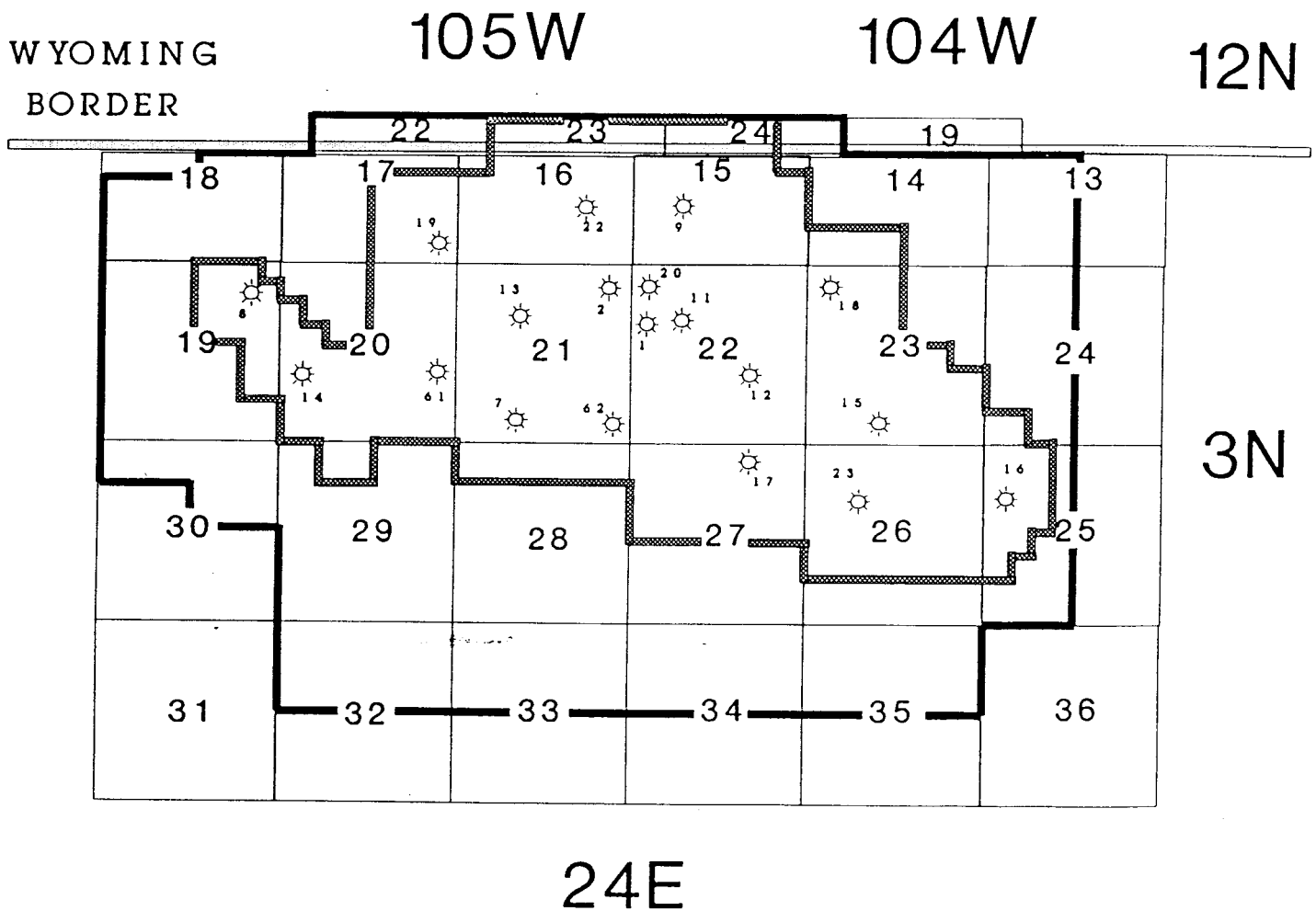
BY:


W. F. Edwards
Vice President

cc: Mr. E. W. Guynn
Chief, Branch of Fluid Minerals
Bureau of Land Management
136 East South Temple
University Club Building, 11th Floor
Salt Lake City, UT 84111

CLAY BASIN UNIT

Daggett County, Utah



UNIT OUTLINE (UTU63009X)

FRONTIER PA

11,162.43 ACRES

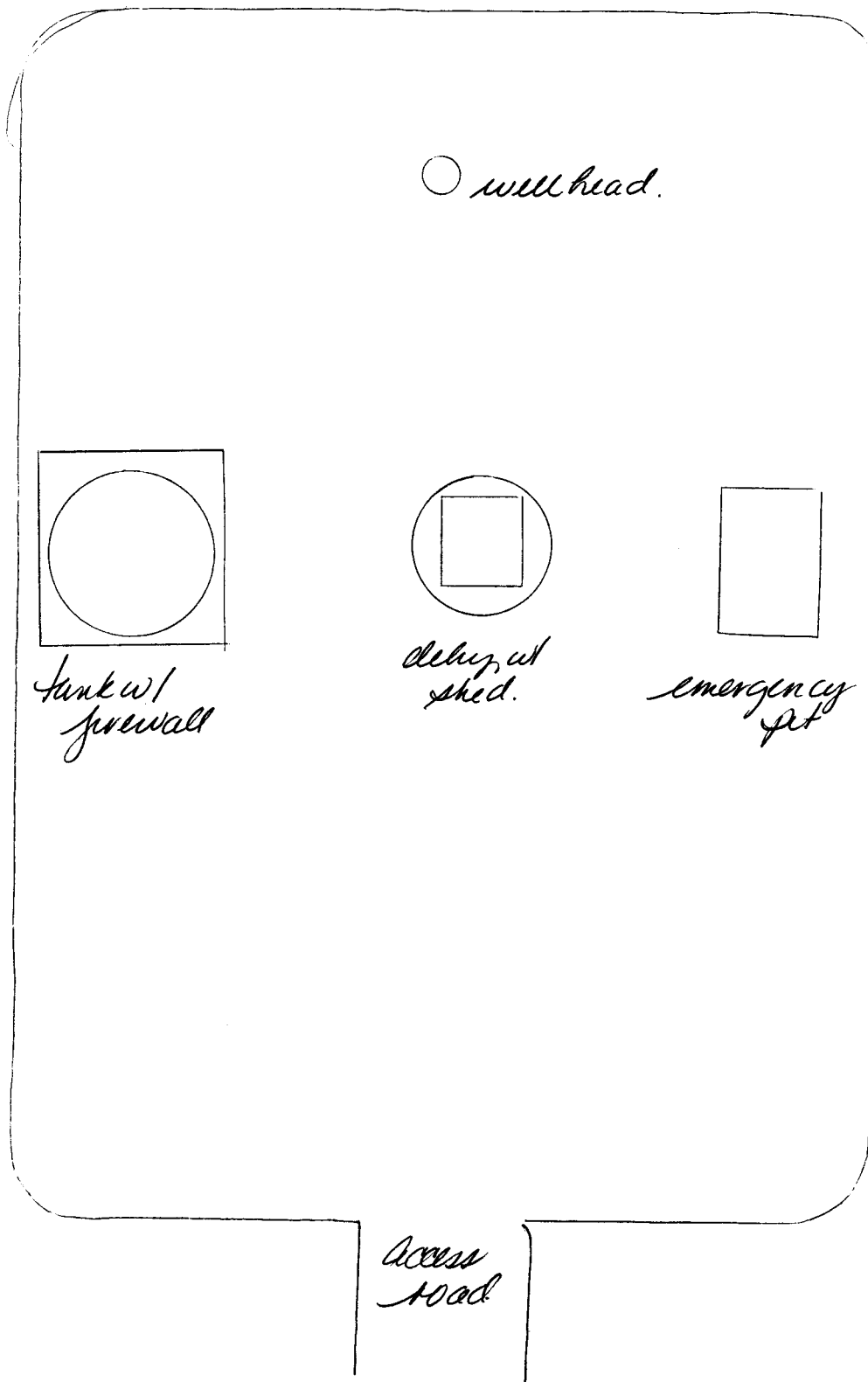
FRONTIER PA ALLOCATION	
FEDERAL	82.17194%
STATE	9.63096%
FEE	8.19710%
4,765.64 Acres	

Clay Basin U#17

Sec 27, 3N, 24E

Ch. 'leg 14 June 80

L N



42-381 50 SHEETS 5 SQUARE
42-382 100 SHEETS 5 SQUARE
42-389 200 SHEETS 5 SQUARE



UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT -" for such proposals

SUBMIT IN TRIPLICATE

1. TYPE OF WELL

☐ OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

WEXPRO COMPANY

3. ADDRESS AND TELEPHONE NO.

P. O. BOX 458, ROCK SPRINGS, WY 82902 (307) 382-9791

4. LOCATION OF WELL (FOOTAGE, SEC., T., R., M., OR SURVEY DESCRIPTION)

SEE ATTACHED SHEET

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF N

TYPE OF SUBMISSION

☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other VARIANCE

1-CHD
2-Photos
3-File
Copy for file
well on
back of Sundry

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Wexpro Company is requesting a variance from the requirement to install Enardo vent stack valves on the storage tanks for the wells listed on the attached sheet. This request is due to the potential freezing problems encountered with the Enardo vent stack valves. In the past storage tanks have been over pressured, as they could not vent, and once over pressured ruptured causing the top of the tank to be thrown from the tank. The potential tank damage, loss of fluids, fire and ground contamination are our primary safety and environmental concerns for this request.

Accepted by the
Utah Division
Oil, Gas and

Date:

By:

List of wells
on back.

Federal Approval Of This
Action Is Necessary

RECEIVED

OCT 28 2002

DIVISION OF
OIL, GAS AND MINING

RECEIVED TO OPERATOR
10-29-02
CHD

14. I hereby certify that the foregoing is true.

Signed *[Signature]*

Title Title G. T. Nimmo, Operations Manager

Date October 21, 2002

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: _____

Title 18 U.S. C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

<u>WELL NAME</u>	<u>API NUMBER</u>	<u>LEGAL DESCRIPTION</u>	<u>COUNTY, STATE</u>	<u>UNIT CA PA NUMBER</u>	<u>LEASE NUMBER</u>
CLAY BASIN FIELD UNIT				892000323B	
UNIT NO. 1	4300915625	SW NW 22-3N-24E	DAGGETT, UT		SL-045051-a
UNIT NO. 7	4300915631	SE SW 21-3N-24E	DAGGETT, UT		SL-045051-b
UNIT NO. 8	4300915632	NE NE 19-3N-24E	DAGGETT, UT		SL-062508
UNIT NO. 9	4300915633	NE SW 15-3N-24E	DAGGETT, UT		SL-045051-b
UNIT NO. 12	4300915636	NW SE 22-3N-24E	DAGGETT, UT		SL-045051-a
UNIT NO. 13	4300915637	SE NW 21-3N-24E	DAGGETT, UT		SL-045051-a
UNIT NO. 14	4300915638	NW SW 20-3N-24E	DAGGETT, UT		SL-062508
UNIT NO. 15	4300915639	SE SW 23-3N-24E	DAGGETT, UT		SL-045051-b
UNIT NO. 16	4300930003	SW NW 25-3N-24E	DAGGETT, UT		SL-045049
UNIT NO. 17	4300930004	NW NE 27-3N-24E	DAGGETT, UT		SL-045053-a
UNIT NO. 18	4300930006	NW NW 23-3N-24E	DAGGETT, UT		SL-045051-b
UNIT NO. 19	4300930008	SE SE 17-3N-24E	DAGGETT, UT		SL-045051-b
UNIT NO. 20	4300930007	NW NW 22-3N-24E	DAGGETT, UT		SL-045051-a
UNIT NO. 22	4300930001	NW SE 16-3N-24E	DAGGETT, UT		ML-807
UNIT NO. 23	4300930009	SE NW 26-3N-24E	DAGGETT, UT		SL-045053-b
UNIT NO. 61	4300930060	NE SE 20-3N-24E	DAGGETT, UT		SL-045051-b
UNIT NO. 62	4300930061	SE SE 21-3N-24E	DAGGETT, UT		SL-045051-b

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an
abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other Instructions on page 2.

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Wexpro Company

3a. Address

P.O. Box 458
Rock Springs, WY 82902

3b. Phone No. (include area code)

307.382.9791

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

665' FNL 1992' FEL NW NE 27-3N-24E

Lat. 40.9735

Long. -109.1898

5. Lease Serial No.

SL-045051-a

6. If Indian, Allottee, or Tribe Name

N/A

7. If Unit or CA. Agreement Name and/or No.

Clay Basin Unit

8. Well Name and No.

Clay Basin Unit 17

9. API Well No.

43-0009-30004

10. Field and Pool, or Exploratory Area

Frontier

11. County or Parish, State

Daggett Utah

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input checked="" type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and abandon	<input type="checkbox"/> Temporarily Abandon	_____
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug back	<input type="checkbox"/> Water Disposal	_____

13. Describe Proposed or Completed Operation (clearly state all pertinent details including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths or pertinent markers and sands. Attach the Bond under which the work will performed or provide the Bond No. on file with the BLM/ BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notice shall be filed only after all requirements, including reclamantion, have been completed, and the operator has determined that the site is ready for final inspection.)

The above well resumed production on December 6, 2007 after being off more than 90 days.

14. I hereby certify that the foregoing is true and correct.

Name (Printed/ Typed)

G.T. Nimmo

Title

Operations Manager

Signature

Date

December 12, 2007

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Title 18 U.S.C. Section 1001 AND Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

DEC 14 2007

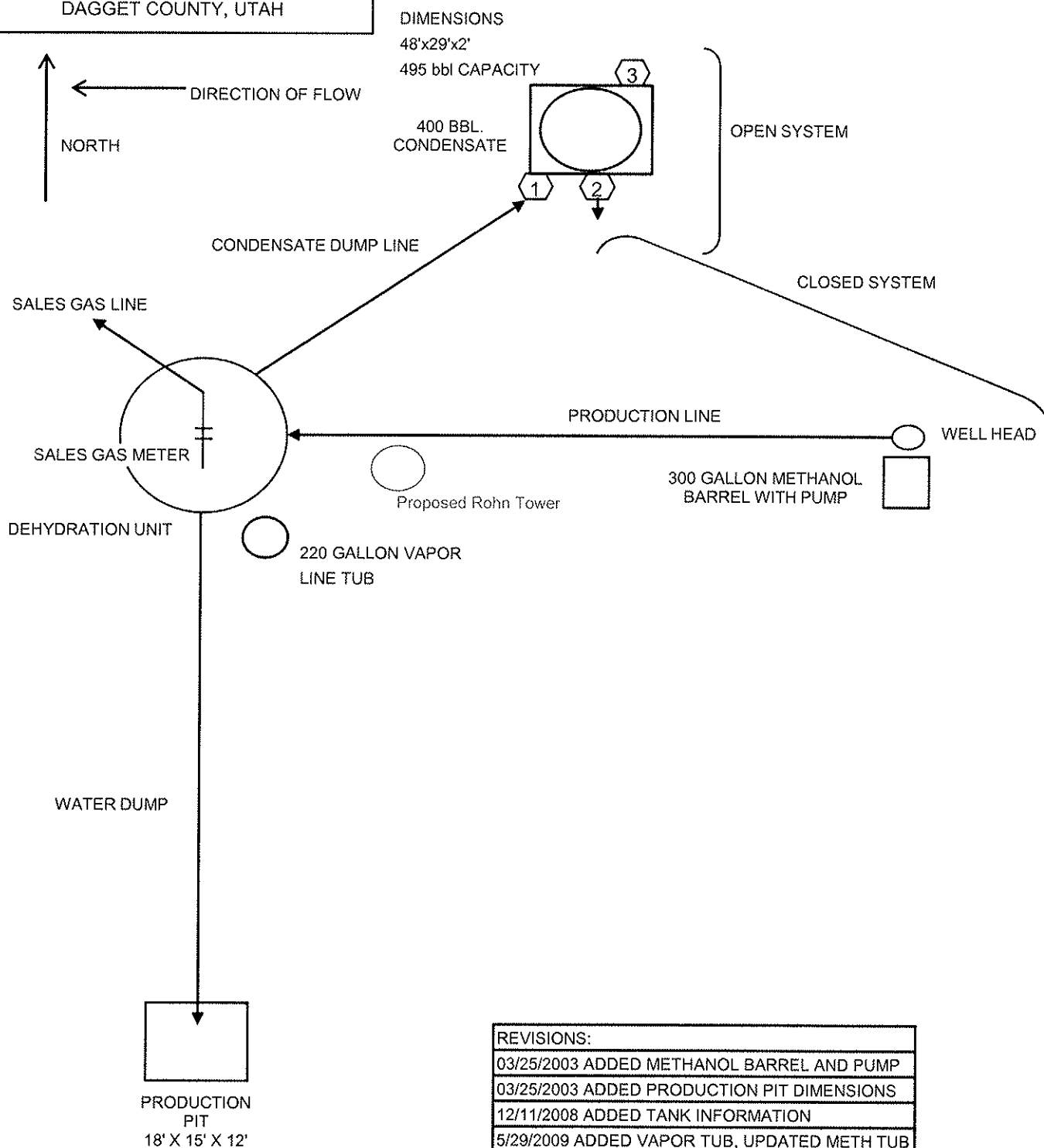
DIV. OF OIL, GAS & MINING

API Well No: 43009300040000

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9			
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045053A			
1. TYPE OF WELL Gas Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: 			
2. NAME OF OPERATOR: WEXPRO COMPANY		7. UNIT or CA AGREEMENT NAME: CLAY BASIN			
3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902		8. WELL NAME and NUMBER: CLAY BASIN UNIT 17			
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0665 FNL 1992 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNE Section: 27 Township: 03.0N Range: 24.0E Meridian: S		9. API NUMBER: 43009300040000			
PHONE NUMBER: 307 922-5612 Ext		9. FIELD and POOL or WILDCAT: CLAY BASIN			
COUNTY: DAGGETT		STATE: UTAH			
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA					
TYPE OF SUBMISSION	TYPE OF ACTION				
<input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start: 11/6/2009 <input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date:	<table style="width:100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input checked="" type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: </td> </tr> </table>		<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input checked="" type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER:
<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input checked="" type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER:			
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. <div style="display: flex; justify-content: space-between;"> <div style="width: 70%;"> <p>Wexpro Company and Questar Gas Management intend to upgrade the existing gas metering equipment. The upgrade will consist of the installation of towers and antennas for radio communications. The Rohn tower will be approximately 20 feet high. The cement base will be buried. The base is 2 feet in diameter and 3 feet in height. The Rohn tower will be used to mount the new flow computer and communication equipment needed to communicate volume data from the well sites to a central SCADA computer located at Red Wash. Questar Gas Management will also be replacing the existing EFM and installing a Fisher FB 107, Fisher 205P MVS and a PGI Temperature Element and any other associated equipment. Please see attached diagrams for placement of the Rohn tower and Specification sheets.</p> </div> <div style="width: 25%; text-align: right;"> <p>Approved by the Utah Division of Oil, Gas and Mining</p> <p>Date: <u>November 03, 2009</u></p> <p>By: <u><i>Derek Duff</i></u></p> </div> </div>					
NAME (PLEASE PRINT) Paul Jibson	PHONE NUMBER 307 922-5647	TITLE Associate Permit Agent			
SIGNATURE N/A		DATE 11/2/2009			

RECEIVED November 02, 2009

WEXPRO COMPANY P.O. BOX 458 ROCK SPRINGS, WY 82902	NOTE: THIS LEASE FALLS UNDER THE SITE & SECURITY PLAN ESTABLISHED BY WEXPRO COMPANY. THE PLAN CAN BE REVIEWED AT THE WEXPRO OFFICE IN ROCK SPRINGS WYOMING WEEKDAYS BETWEEN 7:00 AM AND 5:00 PM	VALVE LEGEND TANK # 391 VALVE # 1 -- OPEN DURING PRODUCTION, SEALED CLOSED DURING SALES VALVE # 2 -- OPEN DURING SALES, SEALED CLOSED DURING PRODUCTION VALVE # 3 -- OPEN ONLY TO DRAIN WATER, SEALED CLOSED DURING PRODUCTION
CLAY BASIN UNIT WELL 17 NWN 27-3N-24E LEASE NO. SL-045053-a UNIT NO. 892000323B DAGGET COUNTY, UTAH		



REVISIONS:
03/25/2003 ADDED METHANOL BARREL AND PUMP
03/25/2003 ADDED PRODUCTION PIT DIMENSIONS
12/11/2008 ADDED TANK INFORMATION
5/29/2009 ADDED VAPOR TUB, UPDATED METH TUB

FloBoss™ 107 Flow Manager.

The FloBoss™ 107 Flow Manager introduces a new technology platform to the FloBoss family of flow computers that raises the bar for modularity, versatility, performance, and ease of use. Whether you need a single or multi-run flow computer or few or many I/O points, the new FloBoss 107 can accommodate your needs. The FloBoss 107 is the ideal measurement solution for many natural gas applications. These include, but are not limited to:

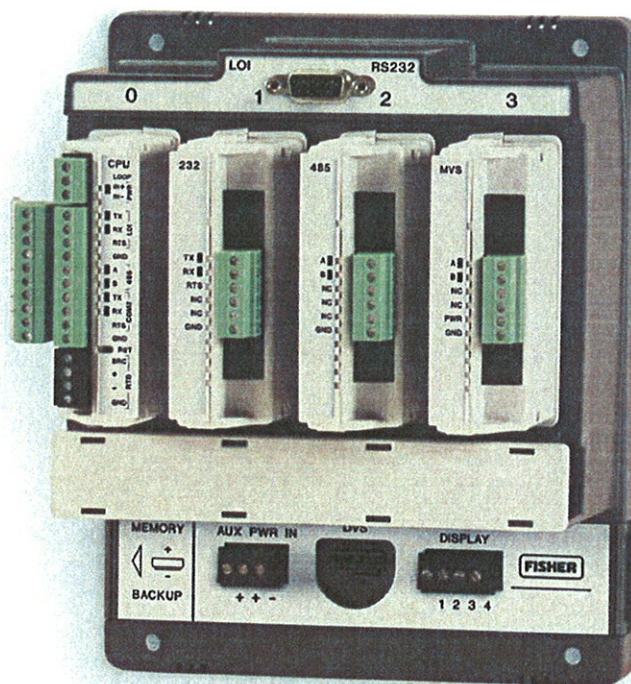
- Custody Transfer
- Wellhead Measurement and Control
- Well Injection Pressure
- Compressor Fuel Gas
- Industrial Gas Usage
- Commercial Gas Usage

The new FloBoss 107 offers you benefits that research has shown flow computer users request. You also get all of the tried and true features of previous FloBoss units such as accurate AGA calculations, data archival, broad communications support, low power consumption, PID loop control, FST control, and operation over extreme temperatures.

API/AGA/ISO Compliant Flow Measurement. The FloBoss 107 maintains API Chapter 21.1 compliant historical archives for measured and calculated values, as well as events and alarms. The firmware has the capability to perform AGA3 orifice flow calculations or AGA7 pulse flow calculations using AGA8 compressibility. It also performs ISO 5167 flow calculations. Other gas flow or properties calculations can be implemented using User C programs.

One to Four Meter Runs. The FloBoss 107 features a built-in dual-variable sensor (DVS) port and RTD input for handling a single meter run. For multiple runs, an optional multi-variable sensor (MVS) module supports up to four remote MVS units.

Scalable and Configurable I/O. You can add a configurable I/O board to the CPU module and up to three configurable I/O modules to the base FloBoss 107. For even more capacity, add an expansion rack to house up to three additional I/O modules.



FloBoss 107 Base Unit

Local or Host Operation. The FloBoss 107 is configured and operated on-site using our Windows® based ROCLINK™ 800 Configuration Software. The FloBoss 107 can also be configured and operated from a computer running popular host software packages. Modbus ASCII and RTU slave or host protocols, as well as native ROC protocol, are supported.

More Communication Choices. The FloBoss 107 comes standard with 3 ports: local operator interface, RS-232, and RS-485. One additional port is supported using an expansion communication module.

Built-in Control Capability. The FloBoss 107 can perform PID control on 8 loops using analog or discrete outputs. A wide range of control problems can be solved easily and quickly with outstanding results. It can also perform logic and sequencing control by means of Function Sequence Tables (FSTs).

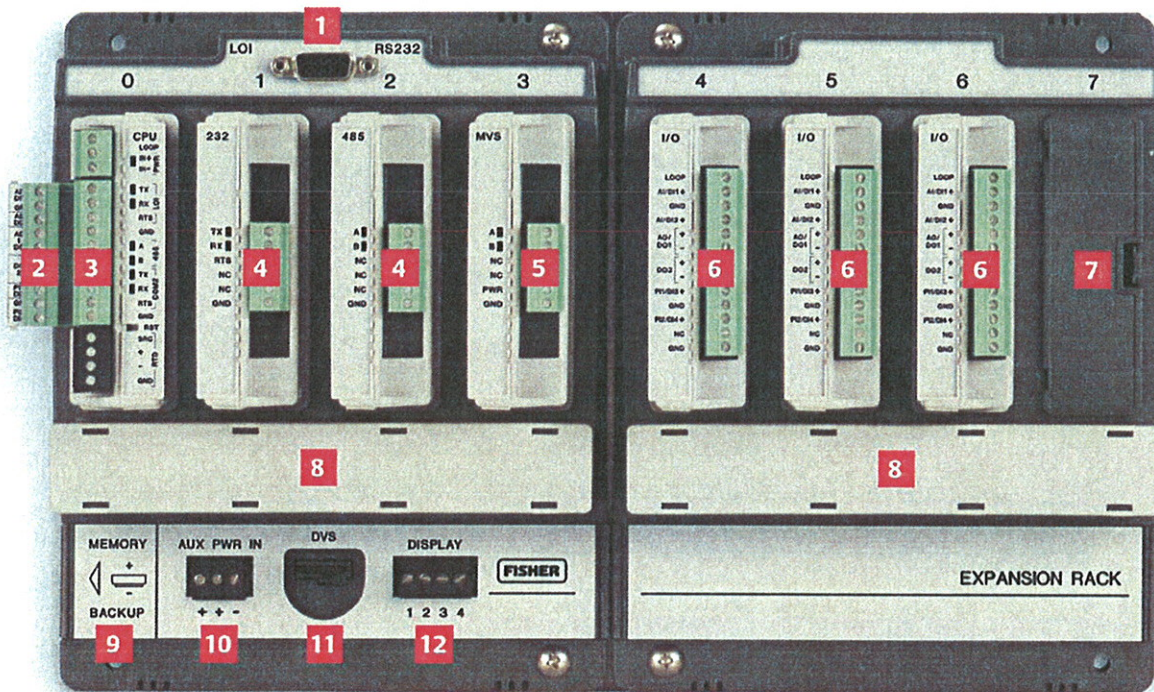
Remote Automation Solutions

Phone (641) 754-3449 Toll Free (800) 807-0730 (US & Canada only)

FAX (641) 754-3630

Website: www.EmersonProcess.com/flow


EMERSON
 Process Management



Base unit (left) provides the backplane, module slots, ports, and electrical interconnections for the FloBoss 107. Dimensions are 204 mm H by 153 mm W by 140 mm D (8 in. H by 6 in. W by 5.5 in. D). Expansion rack (right) plugs into base unit and provides backplane and slots for additional modules. (Same dimensions as base unit).

- 1 Local operator interface port (RS-232) communicates to a laptop or similar PC device for local configuration and data retrieval.
- 2 I/O card is available for the CPU module. Five of the six I/O points are configurable by type (AI/DI, AI/DO, AO/DO, DI/PI, DI/PI) and the sixth is a DO.
- 3 CPU module contains the main processing unit, memory, operational firmware, RS-232 port, RS-485 port, and RTD input.
- 4 Communication modules are available for a second RS-232 port or RS-485 port.
- 5 MVS module supports up to six multi-variable sensor units for differential pressure flow measurement. One MVS module can be used in either slot 4 of the base unit or expansion rack.

- 6 I/O modules provide six I/O points (same as I/O card). Up to six I/O modules can be plugged into the FloBoss 107. 24 Vdc loop power is provided.
- 7 Module slots accommodate I/O and communication modules and are protected by removable covers when not used.
- 8 Covered wiring tray neatly routes field wiring to and from modules.
- 9 Battery compartment uses lithium battery to backup RAM in the CPU.
- 10 Input power range for the FloBoss 107 and I/O is 8 to 30 Vdc.
- 11 DVS port provides a serial data link to a dual-variable sensor (DVS) unit.
- 12 Display port connects a keypad / display unit to the FloBoss 107. Supports ROC and Modbus slave protocols.

©2006 Fisher Controls International, LLC.

FloBoss and ROCLINK are marks of one of the Emerson Process Management companies. All other marks are the property of their respective owners.

This publication is presented for informational purposes only, and while every effort has been made to ensure its accuracy, its content is not to be construed as a warranty or guarantee, expressed or implied, regarding the products described herein or their use or applicability.

ISO 9001:2000



Certificate No. 004372
Certificate No. 005912

D351406X012 / Printed in USA / 5M / 12-06

RECEIVED November 02, 2009

MVS205 Multi-Variable Sensor

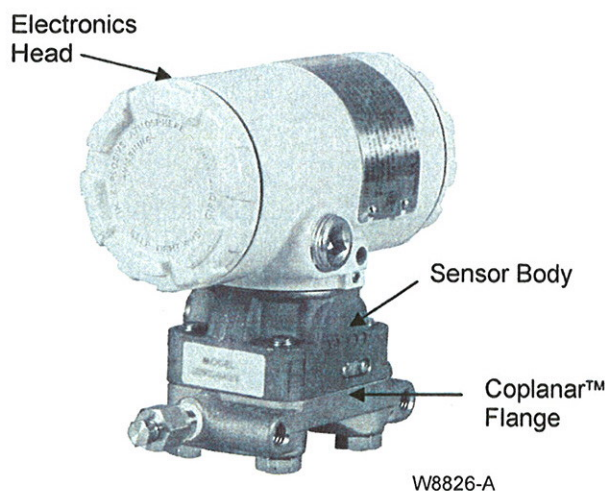
The MVS205 Multi-Variable Sensor (version 1.12 or greater) provides static pressure, differential pressure, and process temperature inputs directly to a ROC 300/800 Series Remote Operations Controller or FloBoss™ 407/500 Series Flow Manager. The inputs from an MVS sensor are used in performing differential pressure type calculations. The MVS205 typically operates as a remote unit that communicates via a serial format.

FloBoss 407 units may use a remote or integral MVS205 sensor. ROC300-Series controllers must be equipped with a Remote MVS Interface (CMA8H). FloBoss 500-Series units must be equipped with a Remote MVS Interface (CR1).

Variables

Functionally, the MVS is a sensor device that measures three flow-related variables simultaneously: differential pressure, static pressure, and temperature. These variables are continuously available to the FloBoss or ROC unit that polls the MVS.

An external three or four-wire RTD is used to sense the process temperature. **The RTD sensor is connected directly to the interface circuit board** in the MVS sensor housing. User-supplied RTD field wiring is required for the connection.



MVS205 Multi-Variable Sensor

Transducer and Interface Circuit

The MVS consists of a transducer and an interface circuit. The transducer, contained in the sensor body, uses capacitance-cell technology to sense differential pressure and piezoresistive technology to sense the static (absolute or gauge) pressure.

The transducer electronics convert the pressure variables directly into a digital format, allowing accurate correction and compensation. The raw temperature is converted by the interface board into digital format. A microprocessor linearizes and corrects the raw pressure signals (from the sensor) using characterization data stored in non-volatile memory.

The interface circuit allows the MVS to connect to and communicate with a ROC or FloBoss using a serial EIA-485 (RS-485) connection. In a Remote MVS, this interface circuit board is enclosed in an explosion-proof electronics head.

Accuracy

Two versions of the MVS sensor are available: MVS205P with reference accuracy of 0.075% and MVS205E with reference accuracy of 0.10%.

Mounting

Attached to the bottom of the sensor body is a Coplanar™ flange. This flange, which provides drain/vent valves, allows the MVS to be mounted on a pipestand, on a wall or panel, or on an integral orifice assembly or manifold valve.

Approvals

A list of North American approvals can be found in the Specifications table on page 2. For information on the European ATEX approved version, please refer to Specification Sheet 2.5:MVSCE.

Flow Computer Division

Website: www.EmersonProcess.com/flow


EMERSON
Process Management

Specifications

DIFFERENTIAL PRESSURE INPUT

Range: 0 to 6.22 kPa (0 to 25" H₂O),
0 to 62.2 kPa (0 to 250" H₂O), or
0 to 248.8 kPa (0 to 1000" H₂O).

Reference Accuracy:

±0.075% of URL (upper range limit) (for MVS205P)

±0.10% of URL (for MVS205E).

Includes linearity, hysteresis, and repeatability effects for spans up to 10:1 turndown.

Stability: ±0.1% of URL for 12 months.

Over Pressure Limit: 250 bar (3626 psi) Applied on either or both sides without damage to the sensor.

STATIC PRESSURE INPUT

Range: Either Absolute or Gauge:
0 to 5516 kPa (0 to 800 psia/psig)
0 to 25,000 kPa (0 to 3626 psia/psig)

Reference Accuracy:

±0.075% of URL (for MVS205P)

±0.10% of URL (for MVS205E).

Includes linearity, hysteresis, and repeatability effects for spans up to 6:1 turndown.

Stability: ±0.1% of URL for 12 months.

Over Pressure Limit: Same as URL.

PROCESS TEMPERATURE INPUT (MVS205 REMOTE ONLY)

Type: For 3 or 4-wire platinum 100-ohm RTD (conforming to IEC 751 Class B), with $\alpha = 0.00385$.

Range: -40 to 400°C (-40 to 752°F).

Reference Accuracy: ±0.28°C (±0.5°F), exclusive of RTD sensor error. Specification includes linearity, hysteresis, and repeatability effects.

Excitation Current: 1.24 mA.

OUTPUT (MVS205 REMOTE ONLY)

EIA-485 (RS-485) asynchronous serial communication using Modbus protocol for up to 605 m (2000 ft) distance.

POWER

Input at 0 to 75°C: 8 to 30 V dc, 245 mW average.

Input at -40 to 0°C: 8.5 to 30 V dc, 245 mW average.

Supplied by ROC, FloBoss, or Remote MVS Interface.

WEIGHT

Including head, 3.0 kg (6.7 lb).

ENVIRONMENTAL

Operating Temperature: -40 to 75°C (-40 to 167°F).

Storage Temperature: -50 to 100°C (-58 to 230°F).

Operating Humidity: 0 to 99%, non-condensing.

DIMENSIONS

147 mm H by 163 mm W by 84 mm D (5.8 in. H by 6.4 in. W by 3.3 in. D).

VIBRATION EFFECT

Sensor outputs shall not shift more than +0.1% of upper range limit per g from 5 to 2000 Hz in any axis when tested per IEC 770, Section 6.2.14.

CONSTRUCTION

Sensor Body and Coplanar Flange: 316 SST.

Wetted Parts: 316 SST is standard; Hastelloy C (NACE compliant) is available. Wetted O-rings are glass-filled TFE.

Electronics Head (MVS205 Remote): Urethane-painted die-cast aluminum alloy, rated Type 4X.

MOUNTING (MVS205 REMOTE ONLY)

Pipestand: Mounts on 50 mm (2 in.) pipe with U-bolt and optional flange bracket.

Wall/panel: Mounts with optional flange bracket, bolted on 71 mm (2.8 in.) centers.

CONNECTIONS

Conduit: Head has two 1/2-inch NPT connections.

Process: 1/4-18 NPT on 2-1/8 inch centers.

APPROVALS (MVS205 REMOTE ONLY)

Evaluated per the Following Standards:

CSA C22.2 No. 30.

CSA C22.2 No. 213.

UL 1203, UL 1604.

Certified by CSA as: MVS205R Models RSE or RSP Series.

Product Markings for Hazardous Locations:

Class I, Division 1, Groups C and D.

Class I, Division 2, Groups A, B, C, and D, T5

(T_{amb}=70°C), T4 (T_{amb}=75°C).

Approved by Industry Canada for use with approved flow computers. Approved as MVS205R Series Remote Sensors (Measurement Canada approval # AG-0412).

Approved by the Alberta Boilers Safety

Association: Approval # 0F0792.2

FloBoss is a mark of one of the Emerson Process Management companies. The Emerson logo is a trademark and service mark of Emerson Electric Co. All other marks are the property of their respective owners. The contents of this publication are presented for informational purposes only. While every effort has been made to ensure informational accuracy, they are not to be construed as warranties or guarantees, express or implied, regarding the products or services described herein or their use or applicability. Fisher Controls reserves the right to modify or improve the designs or specifications of such products at any time without notice.

Emerson Process Management**Flow Computer Division**

Marshalltown, IA 50158 U.S.A.

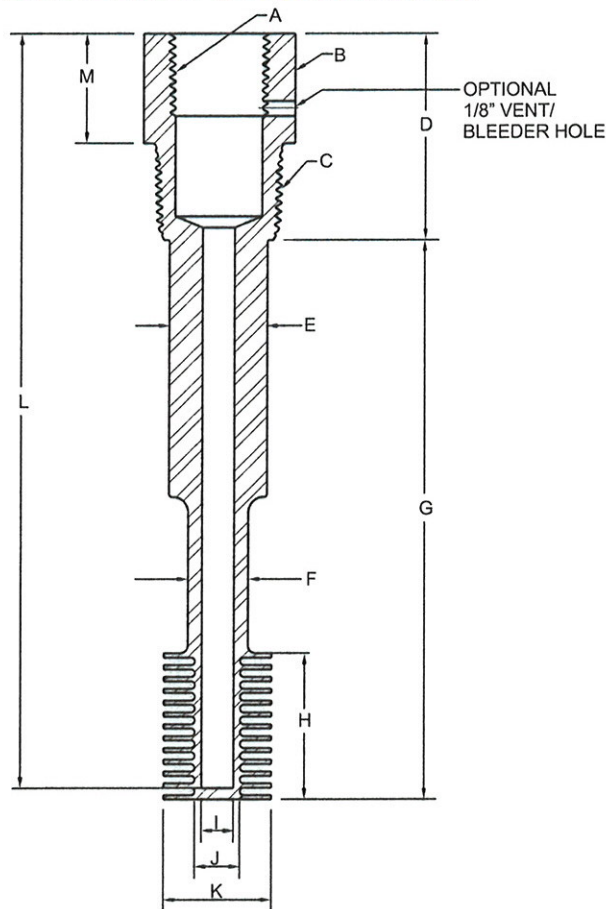
Houston, TX 77041 U.S.A.

Pickering, North Yorkshire UK Y018 7JA

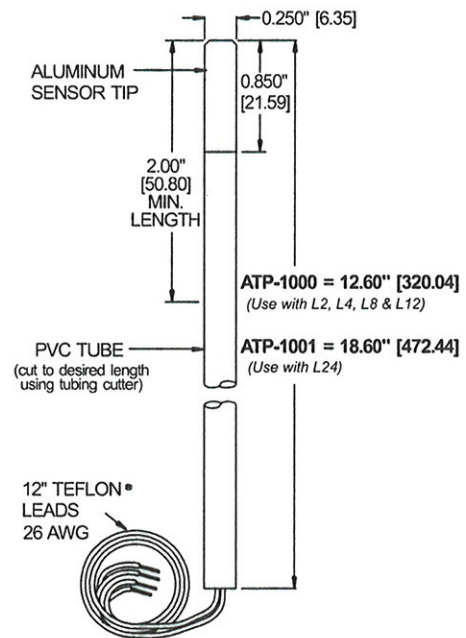
© Fisher Controls International, LLC. 1995-2005. All Rights Reserved.



THERMOSYNC MODEL NO. DIMENSIONS



PROBE



ATP-1000 & ATP-1001 Probe Specifications:

Type: 4-Wire Platinum Wire-Wound
RTD Element
Resistance: 100 Ohms at 0°C (IEC 751)
Alpha Coefficient: .00385
Accuracy: ±0.05°C
Temp. Range: -40°C to +60°C
-40°F to +140°F

Calibration/Accuracy Certification Service Available.

	PROCESS CONN.												
Part Number	A	B	C	D	E	F	G	H	I	J	K	L	M
TAN-12C0-L2	1/2" NPT	1.25"	1/2" NPT	1.69"	0.693	.495"	2.22"	1.20"	260"	37"	645"	3.88"	90"
TAN-12C0-L4	1/2" NPT	1.25"	1/2" NPT	1.69"	0.693	.495"	2.96"	1.20"	260"	37"	645"	4.75"	90"
TAN-12C0-L8	1/2" NPT	1.25"	1/2" NPT	1.69"	0.693	.495"	4.59"	1.20"	260"	37"	645"	6.37"	90"
TAN-12C0-L12	1/2" NPT	1.25"	1/2" NPT	1.69"	0.693	N/A	6.66"	1.20"	260"	37"	645"	8.45"	90"
TAN-12C0-L24	1/2" NPT	1.25"	1/2" NPT	1.69"	0.693	N/A	9.89"	1.20"	260"	37"	645"	11.67"	90"
TAN-34C0-L2	1/2" NPT	1.25"	3/4" NPT	1.69"	0.808	.495"	2.22"	1.20"	260"	37"	85"	3.82"	90"
TAN-34C0-L4	1/2" NPT	1.25"	3/4" NPT	1.69"	0.808	.495"	2.96"	1.20"	260"	37"	85"	4.56"	90"
TAN-34C0-L8	1/2" NPT	1.25"	3/4" NPT	1.69"	0.808	.495"	4.59"	1.20"	260"	37"	85"	6.20"	90"
TAN-34C0-L12	1/2" NPT	1.25"	3/4" NPT	1.69"	0.808	N/A	6.66"	1.20"	260"	37"	85"	8.26"	90"
TAN-34C0-L24	1/2" NPT	1.25"	3/4" NPT	1.69"	0.808	N/A	9.89"	1.20"	260"	37"	85"	11.48"	90"
TAN-10C0-L4	1/2" NPT	1.375"	1" NPT	1.69"	0.808	.495"	2.96"	1.20"	260"	37"	85"	4.75"	90"
TAN-10C0-L8	1/2" NPT	1.375"	1" NPT	1.69"	0.808	.495"	4.59"	1.20"	260"	37"	85"	6.37"	90"
TAN-10C0-L12	1/2" NPT	1.375"	1" NPT	1.69"	0.808	N/A	6.66"	1.20"	260"	37"	85"	8.45"	90"
TAN-10C0-L24	1/2" NPT	1.375"	1" NPT	1.69"	0.808	N/A	9.89"	1.20"	260"	37"	85"	11.67"	90"

All Thermowells:

Material: 316L SS
Press/Temp: 4900 PSI Max @ 330° F
Flow: 100 FPS (L2, L4, L8, L12) or 50 FPS (L24) max in 1000 PSI Natural Gas

Optional Vent/Bleeder Hole Available
Additional Plug & Chain Assembly Available

NOTE: Use a thermal coupling paste or fluid to couple the probe to the well ONLY in the lower .5 inches of the well. DO NOT fill the well with thermal coupling fluid. Spring load the probe to contact the bottom of the well.

U.S. PATENTED - FOREIGN PATENTS PENDING

TDOC-4 REV.11 1-21-03

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045053A
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
1. TYPE OF WELL Gas Well		7. UNIT or CA AGREEMENT NAME: CLAY BASIN
2. NAME OF OPERATOR: WEXPRO COMPANY		8. WELL NAME and NUMBER: CLAY BASIN UNIT 17
3. ADDRESS OF OPERATOR: P.O. Box 458, Rock Springs, WY, 82902		9. API NUMBER: 43009300040000
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0665 FNL 1992 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNE Section: 27 Township: 03.0N Range: 24.0E Meridian: S		9. FIELD and POOL or WILDCAT: CLAY BASIN
		COUNTY: DAGGETT
		STATE: UTAH

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input checked="" type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/>
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/12/2012			
<input type="checkbox"/> SPUD REPORT Date of Spud:			
<input type="checkbox"/> DRILLING REPORT Report Date:			

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well Resumed Production on October 12, 2012 at 11:00 AM,
after being off for more than 90 days.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 October 23, 2012

NAME (PLEASE PRINT) Paul Jibson	PHONE NUMBER 307 352-7561	TITLE Permit Agent
SIGNATURE N/A		DATE 10/18/2012

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING	FORM 9 5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045053A
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME: 7. UNIT or CA AGREEMENT NAME: CLAY BASIN
1. TYPE OF WELL Gas Well	8. WELL NAME and NUMBER: CLAY BASIN UNIT 17
2. NAME OF OPERATOR: WEXPRO COMPANY	9. API NUMBER: 43009300040000
3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902	9. FIELD and POOL or WILDCAT: CLAY BASIN
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0665 FNL 1992 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNE Section: 27 Township: 03.0N Range: 24.0E Meridian: S	COUNTY: DAGGETT STATE: UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start: 3/15/2013 <input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: Production Equipment

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

Wexpro Company, requests approval to upgrade the existing production equipment on the above mentioned well location. The dehy will be removed and replaced with a ProPack. Also, a new meter run and meter building will be installed. All new equipment will be installed on existing disturbance and there will be no new additional surface disturbance. The new equipment will be painted the approved BLM color to match the existing production equipment on location. Upon completion of the new production equipment installation an updated Site Facility Diagram will be submitted to the Vernal BLM Field Office.

**Accepted by the
Utah Division of
Oil, Gas and Mining**

Date: February 25, 2013

By: *Derek Quist*

NAME (PLEASE PRINT) Paul Jibson	PHONE NUMBER 307 352-7561	TITLE Permit Agent
SIGNATURE N/A	DATE 2/20/2013	

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
		5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045053A
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
		7. UNIT or CA AGREEMENT NAME: CLAY BASIN
1. TYPE OF WELL Gas Well		8. WELL NAME and NUMBER: CLAY BASIN UNIT 17
2. NAME OF OPERATOR: WEXPRO COMPANY		9. API NUMBER: 43009300040000
3. ADDRESS OF OPERATOR: P.O. Box 458, Rock Springs, WY, 82902		9. FIELD and POOL or WILDCAT: CLAY BASIN
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0665 FNL 1992 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNE Section: 27 Township: 03.0N Range: 24.0E Meridian: S		COUNTY: DAGGETT
		STATE: UTAH

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input checked="" type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION	OTHER: <input style="width: 100px;" type="text"/>
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 12/23/2013				
<input type="checkbox"/> SPUD REPORT Date of Spud:				
<input type="checkbox"/> DRILLING REPORT Report Date:				

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well Resumed Production on December 23, 2013, after being off for more than 90 days.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 December 30, 2013

NAME (PLEASE PRINT) Paul Jibson	PHONE NUMBER 307 352-7561	TITLE Permit Agent
SIGNATURE N/A		DATE 12/26/2013

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045053A
1. TYPE OF WELL Gas Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
2. NAME OF OPERATOR: WEXPRO COMPANY		7. UNIT or CA AGREEMENT NAME: CLAY BASIN
3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902		8. WELL NAME and NUMBER: CLAY BASIN UNIT 17
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0665 FNL 1992 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNE Section: 27 Township: 03.0N Range: 24.0E Meridian: S		9. API NUMBER: 43009300040000
PHONE NUMBER: 307 922-5612 Ext		9. FIELD and POOL or WILDCAT: CLAY BASIN
COUNTY: DAGGETT		STATE: UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION	<input type="checkbox"/> WILDCAT WELL DETERMINATION
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/25/2014	<input checked="" type="checkbox"/> PRODUCTION START OR RESUME	OTHER: <input style="width: 100px;" type="text"/>		
<input type="checkbox"/> SPUD REPORT Date of Spud:	<input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF			
<input type="checkbox"/> DRILLING REPORT Report Date:				

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well resumed production on October 25, 2014; after being off more than 90 days.

**Accepted by the
 Utah Division of
 Oil, Gas and Mining
 FOR RECORD ONLY
 October 28, 2014**

NAME (PLEASE PRINT) Paul Jibson	PHONE NUMBER 307 352-7561	TITLE Permit Agent
SIGNATURE N/A	DATE 10/28/2014	

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045053A
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
1. TYPE OF WELL Gas Well		7. UNIT or CA AGREEMENT NAME: CLAY BASIN
2. NAME OF OPERATOR: WEXPRO COMPANY		8. WELL NAME and NUMBER: CLAY BASIN UNIT 17
3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902		9. API NUMBER: 43009300040000
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0665 FNL 1992 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNE Section: 27 Township: 03.0N Range: 24.0E Meridian: S		9. FIELD and POOL or WILDCAT: CLAY BASIN
		COUNTY: DAGGETT
		STATE: UTAH

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION	OTHER: <input style="width: 100px;" type="text"/>
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/30/2015	<input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> PRODUCTION START OR RESUME		
<input type="checkbox"/> SPUD REPORT Date of Spud:				
<input type="checkbox"/> DRILLING REPORT Report Date:				

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

This well resumed production on October 30, 2015 after being off more than 90 days.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 November 06, 2015

NAME (PLEASE PRINT) Tammy Fredrickson	PHONE NUMBER 307 352-7514	TITLE Senior Permit Agent
SIGNATURE N/A		DATE 11/5/2015